## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089247

Entity Name: S.L. IVY ENTERPRISES, INC.

FILED Mar 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4635 NW 53RD AVE 4908 WATERSIDE POINTE CIRCLE

SUITE 201(A) ORLANDO, FL 32829 GAINESVILLE, FL 32653

Current Mailing Address: New Mailing Address:

P O BOX 142294 P O BOX 5153

GAINESVILLE, FL 326142294 WINTER PARK, FL 32793

FEI Number: 59-3669269 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

IVY, STEPHEN L CEO

4635 NW 53RD AVE

SUITE 201(A)

GAINESVILLE, FL 32653 US

IVY, STEPHEN L CEO

4908 WATERSIDE POINTE CIRCLE
ORLANDO, FL 32829 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN IVY 03/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 IVY, STEPHEN L MR.
 Name:
 IVY, STEPHEN L MR.

 Address:
 PO BOX 142294
 Address:
 PO BOX 5153

 City-St-Zip:
 GAINESVILLE, FL 32614
 City-St-Zip:
 WINTER PARK, FL 32793

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN IVY C.EO 03/17/2009