

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000037208

FILED
Jan 08, 2007
Secretary of State

Entity Name: DAVID PERKINS ENTERPRISES, INC.

Current Principal Place of Business:

8623 N. LAGOON DRIVE
UNIT C-2
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

4626 BAYWOOD DR
LYNN HAVEN, FL 32444

Current Mailing Address:

8623 N. LAGOON DRIVE
UNIT C-2
PANAMA CITY BEACH, FL 32408

New Mailing Address:

4626 BAYWOOD DR
LYNN HAVEN, FL 32444

FEI Number: 59-3722912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, DAVID
8623 N. LAGOON DRIVE
UNIT C-2
PANAMA CITY BEACH, FL 32408 US

Name and Address of New Registered Agent:

PERKINS, DAVID
4626 BAYWOOD DR
LYNN HAVEN, FL 32444 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:

01/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERKINS, DAVID
Address: 8623 N. LAGOON DR. C-2
City-St-Zip: PANAMA CITY, FL 32408

Title: VP () Delete
Name: PERKINS, MARY A
Address: 8023 N. LAGOON DR C-2
City-St-Zip: PANAMA CITY, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERKINS, DAVID
Address: 4626 BAYWOOD DR
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP (X) Change () Addition
Name: PERKINS, MARY A
Address: 4626 BAYWOOD DR
City-St-Zip: LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID PERKINS

P

01/08/2007

Electronic Signature of Signing Officer or Director

Date