## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000000609

FILED Apr 05, 2011 Secretary of State

Entity Name: DAVIS ENTERPRISES OF LEHIGH ACRES, INC.

| Current Principal Place of Business:   |                            | New Principal Place of        | New Principal Place of Business:          |  |
|--|----------------------------|-------------------------------|---|--|
| 405 LEELAND HGTS BLVD<br>LEHIGH ACRES, FL 33936  | US                         |                               |   |  |
| Current Mailing Address:   |                            | New Mailing Address:          | New Mailing Address:                      |  |
| 405 LEELAND HGTS BLVD<br>LEHIGH ACRES, FL 33936  | US                         |                               |   |  |
| FEI Number: 95-4893267 FE  | I Number Applied For()     | FEI Number Not Applicable ( ) | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent:  |                            | Name and Address of           | Name and Address of New Registered Agent: |  |
| DAVIS, HENRY<br>405 LEELAND HGTS BLVD<br>LEHIGH ACRES, FL 33936  | 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:   |                            |                               |   |  |
| Electronic Si  | gnature of Registered Ager | nt                            | Date                                      |  |

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: DAVIS, HENRY

Address: 405 LEELAND HGTS BLVD City-St-Zip: LEHIGH ACRES, FL 33936 US

I hereby 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 all other like empowered.

SIGNATURE: HENRY DAVIS PD 04/05/2011