

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90035 035 \*\*\*150.00

DOCUMENT # P03000083836

1. Entity Name

DAVE CO BUILDINGS



Principal Place of Business

P O BOX 1076  
BLOUNTSTOWN FL 32424

Mailing Address

P O BOX 1076  
BLOUNTSTOWN FL 32424



2. Principal Place of Business - No P.O. Box #

18347 NW Jap Austin Rd

Suite, Apt. #, etc.

3. Mailing Address

18347 NW Jap Austin Rd

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Blountstown, FL

Zip

32424

Country

USA

City & State

Blountstown, FL

Zip

32424

Country

USA

4. FEI Number 91-2199004

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZIESEMER, DAVE  
18347 NW JAP AUSTIN RD  
BLOUNTSTOWN FL 32424

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME ZIESEMER, DAVE  
STREET ADDRESS P O BOX 1076  
CITY- ST- ZIP BLOUNTSTOWN FL 32424

TITLE VD ☐ Delete  
NAME MARTIN, MICHAEL  
STREET ADDRESS 15695 SW FAIRCLOTH RD  
CITY- ST- ZIP BLOUNTSTOWN FL 32424

TITLE SD ☐ Delete  
NAME ZIESEMER, SHANNON R  
STREET ADDRESS P O BOX 1076  
CITY- ST- ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME Dave Ziesemer  
STREET ADDRESS 18347 NW Jap Austin Rd  
CITY- ST- ZIP Blountstown, FL 32424

TITLE VD ☒ Change ☐ Addition  
NAME Michael Martin  
STREET ADDRESS 14922 SW Abe Springs Rd  
CITY- ST- ZIP Blountstown, FL 32424

TITLE SD ☒ Change ☐ Addition  
NAME Shannon Ziesemer  
STREET ADDRESS 18347 NW Jap Austin Rd  
CITY- ST- ZIP Blountstown, FL 32424

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Dave Ziesemer 4-3-07 (450) 447-0652