

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124329

Entity Name: C DOVE ENTERPRISES, INC.

FILED  
Apr 16, 2008  
Secretary of State

## Current Principal Place of Business:

6303 MERRIEWOOD DR.  
ORLANDO, FL 32808

## New Principal Place of Business:

6303 MERRIEWOOD DR.  
ORLANDO, FL 32818

## Current Mailing Address:

6303 MERRIEWOOD DR.  
ORLANDO, FL 32808

## New Mailing Address:

6303 MERRIEWOOD DR.  
ORLANDO, FL 32818

FEI Number: 55-0853300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, CRYSTAL  
6303 MERRIEWOOD DR.  
ORLANDO, FL 32808 US

## Name and Address of New Registered Agent:

WILLIAMS, CRYSTAL  
6303 MERRIEWOOD DR.  
ORLANDO, FL 32818 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: CRYSTAL WILLIAMS

04/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILLIAMS, CRYSTAL  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32808

Title: V ( ) Delete  
Name: WILLIAMS, JOHN  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32808

Title: S ( ) Delete  
Name: WILLIAMS, TAURECA  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WILLIAMS, CRYSTAL  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32818

Title: V (X) Change ( ) Addition  
Name: WILLIAMS, JOHN  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32818

Title: S (X) Change ( ) Addition  
Name: WILLIAMS, TAURECA  
Address: 6303 MERRIEWOOD DR.  
City-St-Zip: ORLANDO, FL 32818

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: CRYSTAL WILLIAMS

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date