

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000146757

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** DMF CONSULTING OF ENGLEWOOD, INC.

**Current Principal Place of Business:**

5060 NORTH BEACH RD #101  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

1180 SYLVERTIS RD  
WATERFORD, MI 48328

**New Mailing Address:**

1130 SYLVERTIS RD  
WATERFORD, MI 48328

**FEI Number:** 20-0454404

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEAUDOIN, DAN C  
5060 NORTH BEACH RD #101  
ENGLEWOOD, FL 34223 US

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

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 Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** OWN  
**Name:** FRY, FRED M OWNER  
**Address:** 2424 PLACINDA RD.  
**City-St-Zip:** ENGLEWOOD, FL 34224 US

**Title:** OWN  
**Name:** BEAUDOIN, DAN C OWNER  
**Address:** 2700 N. BEACH RD. #B203  
**City-St-Zip:** ENGLEWOOD, FL 34223 US

**Title:** OWN  
**Name:** BEAUDOIN, MIKE H OWNER  
**Address:** 1400 BEACH RD. #4  
**City-St-Zip:** ENGLEWOOD, FL 34223

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:** FRED FRY

OWN

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date