

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000137627

Entity Name: ALLIED FENCE USA CORP

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1600 STARFIRE LN,  
OCOE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 561029  
ORLANDO, FL 32856

**New Mailing Address:**

1600 STARFIRE LN,  
OCOE, FL 34761

FEI Number: 20-2922836

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIDSON, KIM M  
1600 STARFIRE LANE  
OCOE, FL 34761 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: VP  
Name: VARVEL, RON W  
Address: 2705 EAST CRYSTAL LAKE AVE  
City-St-Zip: ORLANDO, FL 32806 US

Title: PRES  
Name: DAVIDSON, AARON H  
Address: 1600 STARFIRE LN  
City-St-Zip: OCOE, FL 34761 OR

Title: VP  
Name: DAVIDSON, KIM M  
Address: 1600 STARFIRE  
City-St-Zip: OCOE, FL 34761 OR

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: KIM DAVIDSON

VICE

04/30/2011

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

\_\_\_\_\_  
Date