

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005237

Entity Name: NUVEE ENTERPRISES, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

8501 SW 10TH LANE
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

8501 SW 10TH LANE
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 43-2069302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTTON, MICHELLE
8501 SW 10TH LANE
OKEECHOBEE, FL 34974 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SUTTON, DONALD B
Address: 8501 SW 10TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: DS () Delete
Name: SUTTON, MICHELLE
Address: 8501 SW 10TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: DV () Delete
Name: SUTTON, DONALD L
Address: 202 TROCADERO
City-St-Zip: CLEWISTON, FL 33440

Title: DV () Delete
Name: SUTTON, DANIEL K
Address: 202 TROCADERO
City-St-Zip: CLEWISTON, FL 33440

Title: DV (X) Delete
Name: CHANEY, MELVIN E
Address: 3332 HOLCOLM RD
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHELLE SUTTON

DS

04/27/2009

Electronic Signature of Signing Officer or Director

Date