

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000065911

Entity Name: WILLIAM DEYO INC

**FILED**  
**Oct 07, 2006**  
**Secretary of State**

## **Current Principal Place of Business:**

642 CLIFTON STREET  
IMMOKALEE, FL 34142

## **New Principal Place of Business:**

642 CLIFTON ROAD  
IMMOKALEE, FL 34142

## **Current Mailing Address:**

642 CLIFTON STREET  
IMMOKALEE, FL 34142

## **New Mailing Address:**

642 CLIFTON ROAD  
IMMOKALEE, FL 34142

FEI Number: 20-2812465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEYO, WILLIAM  
642 CLIFTON STREET  
IMMOKALEE, FL 34142 US

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

DEYO, WILLIAM  
642 CLIFTON ROAD  
IMMOKALEE, FL 34142 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: WILLIAM DEYO

10/07/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P/S ( ) Delete  
Name: DEYO, WILLIAM  
Address: 642 CLIFTON RD  
City-St-Zip: IMMOKALEE, FL 34142

Title: VP ( ) Delete  
Name: BOURLAND, JOHN D  
Address: 309 ADAMS AVENUE W  
City-St-Zip: IMMOKALEE, FL 34142

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/T (X) Change ( ) Addition  
Name: DEYO, WILLIAM  
Address: 642 CLIFTON RD  
City-St-Zip: IMMOKALEE, FL 34142

Title: VP/S (X) Change ( ) Addition  
Name: DEYO, EVA J  
Address: 642 CLIFTON RD  
City-St-Zip: IMMOKALEE, FL 34142

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM DEYO

P/T

10/07/2006

Electronic Signature of Signing Officer or Director

Date