

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90047 014 ***150.00

DOCUMENT # P05000120124

1. Entity Name
KEN DAVIE, INC.



Principal Place of Business
~~3001 SE DARIEN RD.~~
~~PORT ST. LUCIE, FL 34952~~ US

Mailing Address
~~3001 SE DARIEN RD.~~
~~PORT ST. LUCIE, FL 34952~~ US

40010300



2. Principal Place of Business - No P.O. Box #
1997 SE Mantua St
Suite, Apt. #, etc.

3. Mailing Address
1997 SE Mantua St
Suite, Apt. #, etc.

01302007 Chg-P CR2E034 (12/06)

City & State
Port St Lucie FL
Zip Country
34952 ST Lucie

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Port St Lucie, FL
Zip Country
34952 St Lucie

4. FEI Number
20-3436594
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DAVIE, KENNETH R
3001 SE DARIEN RD.
PORT ST. LUCIE, FL 34952

7. Name and Address of New Registered Agent

Name
Ken Davie Inc
Street Address (P.O. Box Number is Not Acceptable)
1997 SE Mantua St

City
Port St Lucie FL **FL** Zip Code
34952

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Kenneth R. Davie**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-30-07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
P ☒ Delete
NAME
DAVIE, KENNETH R
STREET ADDRESS
3001 SE DARIEN RD.
CITY-ST-ZIP
PORT ST. LUCIE, FL 34952

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
President ☒ Change ☐ Addition
NAME
Davie, Kenneth R
STREET ADDRESS
1997 SE Mantua Street
CITY-ST-ZIP
Port St Lucie, FL 34952

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Kenneth R. Davie**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-07 **772 337-3145**
Date Daytime Phone #