

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000042972

**Entity Name:** DAVID TALBOTT, INC.

**FILED**  
**Feb 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5378 WILBAR LANE  
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1524  
HAINES CITY, FL 33845

**New Mailing Address:**

PO BOX 1168  
HAINES CITY, FL 33845

**FEI Number:** 04-3850440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TALBOTT, DAVID  
5378 WILBAR LANE  
HAINES CITY, FL 33844 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: DP  
Name: TALBOTT, DAVID  
Address: PO BOX 1168  
City-St-Zip: HAINES CITY, FL 33845 15

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: DAVID TALBOTT

PRES

02/20/2012

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

\_\_\_\_\_  
Date