

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000045138

FILED
May 01, 2009
Secretary of State

Entity Name: LA REVERIE INCORPORATED

Current Principal Place of Business:

1720 SW 85TH TERRACE
MIRAMAR, FL 33025

New Principal Place of Business:

312 CLOVERDALE ROAD
WINTER HAVEN, FL 33884

Current Mailing Address:

1720 SW 85TH TERRACE
MIRAMAR, FL 33025

New Mailing Address:

312 CLOVERDALE ROAD
WINTER HAVEN, FL 33884

FEI Number: 42-1700650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, SHARAH
1720 SW 85TH TERRACE
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

WILLIAMS, SHARAH
312 CLOVERDALE ROAD
WINTER HAVEN, FL 33884 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: _____

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WILLIAMS, SHARAH
Address: 1720 SW 85TH TERRACE
City-St-Zip: MIRAMAR, FL 33025

Title: DVST () Delete
Name: WILLIAMS, SHARAH
Address: 1720 SW 85TH TERRACE
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WILLIAMS, SHARAH
Address: 312 CLOVERDALE ROAD
City-St-Zip: WINTER HAVEN, FL 33884

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: SHARAH WILLIAMS

DP

05/01/2009

Electronic Signature of Signing Officer or Director

Date