

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038744

FILED
Mar 11, 2008
Secretary of State

Entity Name: AVALON ENTERPRISES OF S.W. FLORIDA, INC.

Current Principal Place of Business:

1100 ELROD WAY
LEHIGH ACRES, FL 33936

New Principal Place of Business:

1100 ELROD WAY
LEHIGH ACRES, FL 33974

Current Mailing Address:

1100 ELROD WAY
LEHIGH ACRES, FL 33936

New Mailing Address:

1100 ELROD WAY
LEHIGH ACRES, FL 33974

FEI Number: 20-8743882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELROD, WAYNE
1100 ELROD WAY
LEHIGH ACRES, FL 33936 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: DPST () Delete
Name: ELROD, WAYNE
Address: 2301 JETRIDGE ST
City-St-Zip: ALVA, FL 33920

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ELROD, WAYNE
Address: 2301 JETRIDGE ST
City-St-Zip: ALVA, FL 33920

Title: ST () Change (X) Addition
Name: ELROD, AMY
Address: 1100 ELROD
City-St-Zip: LEHIGH ACRES, FL 33974

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: WAYNE M. ELROD

DP

03/11/2008

Electronic Signature of Signing Officer or Director

Date