

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000068047

Entity Name: DOUG'S DO-IT-ALL INC

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

32256 WOLFS TRAIL  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

32256 WOLFS TRAIL  
SORRENTO, FL 32776

**New Mailing Address:**

FEI Number: 27-0743577

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VAN CLEAVE, DOUGLAS L  
32256 WOLFS TRAIL  
SORRENTO, FL 32776 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: P,D  
Name: VAN CLEAVE, DOUGLAS L  
Address: 32256 WOLFS TRAIL  
City-St-Zip: SORRENTO, FL 32776

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: DOUG VAN CLEAVE

OFF.

01/18/2012

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

\_\_\_\_\_  
Date