2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P93000059199

Entity Name: DEVOE FIELDS ENTERPRISES, INC.

Current Principal Place of Business:

101 NW ANDRA DAVIS ST
LIVE OAK, FL 32064 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1483
LIVE OAK, FL 32064 US

New Mailing Address:

FEI Number: 59-3193250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIELDS, MAE DEVOE
101 NW ANDRA DAVIS STREET
LIVE OAK, FL 32064 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: DPT ( ) Delete
Name: FIELDS, MAE DEVOE
Address: 101 NW ANDRA DAVIS ST
City-St-Zip: LIVE OAK, FL 32064

Title: DVS ( ) Delete
Name: FIELDS, CLYDE LEE
Address: 11303 168TH ST
City-St-Zip: MCALPIN, FL 32062

Title: D ( ) Delete
Name: FIELDS, MACY L
Address: 11303 168TH ST
City-St-Zip: MCALPIN, FL 32062

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: FIELDS, CLYDE LEE
Address: 11303 168TH ST
City-St-Zip: MCALPIN, FL 32062

Title: DS (X) Change ( ) Addition
Name: FIELDS, MACY L
Address: 11303 168TH ST
City-St-Zip: MCALPIN, FL 32062

Title: D ( ) Change (X) Addition
Name: BAKER, DONNA M
Address: 12 CROSSINGS BLVD
City-St-Zip: BLUFFTON, SC 29910 US

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: MAE DEVOE FIELDS PRES 03/24/2009
Electronic Signature of Signing Officer or Director Date