## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000011375

Entity Name: I.D.S. ENTERPRISES, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2930 APPALACHIAN TRAIL POLK CITY, FL 33868 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 2085 WINTER HAVEN, FL 338832085 US

FEI Number: 65-0465185 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GRAVIS, ANA MARIA PRESIDE

405 N CITRUS GROVE BLVD

POLK CITY, FL 33868 US

GRAVIS, ANA MARIA PRESIDE

2930 APPALACHIAN TRAIL

POLK CITY, FL 33868 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: ANA MARIA GRAVIS 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution (X).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition **PVTS** ( ) Delete Title: **PVTS** GRAVIS, ANA MARIA PRESIDE Name: GRAVIS, ANA MARIA PRESIDE Name: 405 N CITRUS GROVE BLVD 2930 APPALACHIAN TRAIL Address: Address: City-St-Zip: POLK CITY, FL 33868 City-St-Zip: POLK CITY, FL 33868

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: ANA MARIA GRAVIS PVTS 04/29/2009