

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000092850

Entity Name: ARGYLE VENTURES, INC.

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

8638 PHILIPS HIGHWAY #3  
JACKSONVILLE, FL 32256

## **New Principal Place of Business:**

## **Current Mailing Address:**

8638 PHILIPS HIGHWAY #3  
JACKSONVILLE, FL 32256

## **New Mailing Address:**

FEI Number: 59-3291418

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DONZIGER, MICHAEL  
8638 PHILIPS HWY., STE. #3  
JACKSONVILLE, FL 32256 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: DP  
Name: DONZIGER, MICHAEL  
Address: 8638 PHILIPS HWY #3  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D  
Name: LEVE, WARREN G  
Address: 165 SEA ISLAND DR  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S  
Name: DONZIGER, MICHAEL  
Address: 8638 PHILIPS HWY., #3  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPT  
Name: LEVE, G. WARREN  
Address: 165 SEA ISLAND DRIVE  
City-St-Zip: PONTEVEDRA BEACH, FL 32082

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: MICHAEL DONZIGER

S

02/23/2011

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

\_\_\_\_\_  
Date