

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000034357

1. Entity Name

DORIS EAVES REALTY, INC.



Principal Place of Business

**2441 BUCKNELL DR
VALRICO FL 33594**

Mailing Address

**2441 BUCKNELL DR
VALRICO FL 33594
US**



2. Principal Place of Business - No P.O. Box #

2441 BUCKNELL DR.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

VALRICO, FLORIDA

City & State

FLORIDA

4. FEI Number

59-3313519

Applied For

Not Applicable

Zip

33594

Country

HILLSBOROUGH

Zip

33594

Country

FLORIDA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**EAVES, ALFRED C
2441 BUCKNELL DR
VALRICO FL 33594**

7. Name and Address of New Registered Agent

Name

ALFRED C. EAVES

Street Address (P.O. Box Number is Not Acceptable)

2441 BUCKNELL DR.

City

VALRICO

FL

Zip Code

33594

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alfred C. Eaves

4-28-2008

Signature typed or printed name of registered agent and title, if applicable.

Signature typed or printed name of registered agent and title, if applicable.

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	EAVES, DORIS L	
STREET ADDRESS	2441 BUCKNELL DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	SDT	☐ Delete
NAME	EAVES, ALFRED C	
STREET ADDRESS	2441 BUCKNELL DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	T	☐ Delete
NAME	EAVES, MARKHHNE R	
STREET ADDRESS	720 DEW BLOOM RD.	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME	U00000939811	
STREET ADDRESS	05/28/08-80043-007 150.00	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, without other law empowered.

SIGNATURE

Doris Eaves

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone Number

4-28-2008 (813-654-0110)