

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S28045

FILED
Apr 12, 2010
Secretary of State

Entity Name: DAVENPORT ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

DAVENPORT ESTATES
2900 POWERLINE RD
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

DAVENPORT ESTATES
2900 POWERLINE RD
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-3056917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRYAN, SALLY
LOT 179 DAVENPORT RV RESORT
2900 POWERLINE ROAD
HAINES CITY, FL 33844 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: VP
Name: JOHNSON, RON
Address: 2900 POWER LINE RD. LOT 87
City-St-Zip: HAINES CITY, FL 33844

Title: S
Name: GERCKEN, MARCELLA
Address: 2900 POWERLINE RD LOT 174
City-St-Zip: HAINES CITY, FL 338449063

Title: P
Name: CASE, BILL
Address: 2900 POWERLINE RD. LOT 87
City-St-Zip: HAINES CITY, FL 33844

Title: D
Name: ARMSTRONG, JEANNE
Address: 2900 POWERLINE RD. LOT 70
City-St-Zip: HAINES CITY, FL 33844

Title: T
Name: CONNALLY, VINCE
Address: 2900 POWER LINE RD LOT 11
City-St-Zip: HAINES CITY, FL 33844

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: BILL CASE

P

04/12/2010

Electronic Signature of Signing Officer or Director

Date