

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000044617

**Entity Name:** DAVID WEEKS CORP.

**Current Principal Place of Business:**

5210 PRIME TERRACE  
NORTH PORT, FL 34286

**Current Mailing Address:**

5210 PRIME TERRACE  
NORTH PORT, FL 34286 US

**FEI Number: 88-3544402**

**Certificate of Status Desired: No**

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

WEEKS, DAVID M SR  
5210 PRIME TERRACE  
NORTH PORT,, FL 34286 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name WEEKS, DAVID M SR  
Address 5210 PRIME TERRACE  
City-State-Zip: NORTH PORT FL 34286

*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: DAVID M. WEEKS**

**PRESIDENT**

**03/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date