

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V11880

FILED  
May 02, 2012  
Secretary of State

**Entity Name:** EASTMOND ENTERPRISES, INC.

**Current Principal Place of Business:**

314 GUNNERY ROAD SOUTH  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

314 GUNNERY RD SOUTH  
LEHIGH ACRES, FL 33971

**New Mailing Address:**

**FEI Number:** 65-0327647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EASTMOND, STANVILLE  
309 MONROE AVENUE  
LEHIGH ACRES, FL 33936 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: D  
Name: EASTMOND, STANVILLE  
Address: 309 MONROE AVE  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: T  
Name: EASTMOND, MARILYN  
Address: 309 MONROE AVE  
City-St-Zip: LEHIGH ACRES, FL 33936

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: STANVILLE EASTMOND

PRES

05/02/2012

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

\_\_\_\_\_ Date