

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 05, 2007 08:00 AM**  
**Secretary of State**



**DOCUMENT # 218039**  
 1. Entity Name  
**DAVIS CONCRETE, INC.**

Principal Place of Business      Mailing Address  
**968 DOUGLAS AVE.**                      **968 DOUGLAS AVE.**  
**DUNEDIN FL 34698**                      **DUNEDIN FL 34698**



2. Principal Place of Business - No P.O. Box #      3. Mailing Address  
 Suite, Apt. #, etc.                      Suite, Apt. #, etc.  
 City & State                      City & State  
 Zip                      Country                      Zip                      Country

1st MOORE      CR2E034 (10/06)

**6. Name and Address of Current Registered Agent**  
**DAVIS, L. DOUGLAS, JR.**  
**559 CHICAGO AVENUE**  
**DUNEDIN FL 34698**

4. FEI Number      Applied For  
**59-6059461**                      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

**7. Name and Address of New Registered Agent**  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City                      **FL**      Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 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	VD	<input type="checkbox"/> Delete
NAME	DAVIS, L. DOUGLAS, JR.	
STREET ADDRESS	559 CHICAGO AVENUE	
CITY-STATE-ZIP	DUNEDIN FL	
TITLE	PTD	<input type="checkbox"/> Delete
NAME	DAVIS, D. RANDALL	
STREET ADDRESS	1480 STURBRIDGE COURT	
CITY-STATE-ZIP	DUNEDIN FL	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	DAVIS, JEREMY S	
STREET ADDRESS	1480 STURBRIDGE COURT	
CITY-STATE-ZIP	DUNEDIN FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	KELLER, GARRY M	
STREET ADDRESS	2107 GULFVIEW DR.	
CITY-STATE-ZIP	HOLIDAY FL 34691	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	000000623109	
CITY-STATE-ZIP	02/13/07-80053-007 150.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-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, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_      Date: **2/2/07**      Daytime Phone #: **727-733-3149**