2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2002 8:00 am
Secretary of State
01-15-2002 90048 017 ***150.00

DOCUMENT # P01000047442

1. Entity Name
DAVIS & DAVIS-CERTIFIED PUBLIC ACCOUNTANTS, P.A.

Principal Place of Business	Mailing Address
17 PACIFIC ST. ST. AUGUSTINE FL 32084	34 BAYVIEW DR. ST. AUGUSTINE FL 32084

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
17 PACIFIC STREET		17 PACIFIC STREET	
Suite, Apt. #, etc.: SUITE A		Suite, Apt. #, etc.: SUITE A	
City & State: ST. AUGUSTINE, FL		City & State: ST. AUGUSTINE, FL	
Zip: 32084	Country: UNITED STATES	Zip: 32084	Country: UNITED STATES

4. FEI Number 59-3720010 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOLES, JOSEPH L JR 19 RIBERIA ST. ST. AUGUSTINE FL 32084	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

9. 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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST DAVIS, BRADLEY K 17 PACIFIC ST. ST. AUGUSTINE FL 32084	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DAVIS, BRADLEY K. 34 BAY VIEW DRIVE ST. AUGUSTINE, FL 32084	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DAVIS, TREVOR J. 15 WALDO STREET ST. AUGUSTINE, FL 32084	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bradley K. Davis BRADLEY K DAVIS 1-7-02 (904)819-1799
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)