

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2008 8:00 am
Secretary of State

04-02-2008 90026 050 ***150.00

DOCUMENT # P05000167668 1. Entity Name A.D. DAVIS CONSTRUCTION CORP.			
Principal Place of Business 3940 LEWIS SPEEDWAY ST AUGUSTINE, FL 32085		Mailing Address P O BOX 8360 ST AUGUSTINE, FL 32085-3380	
2. Principal Place of Business - No P.O. Box # 3940 LEWIS SPEEDWAY		3. Mailing Address 3940 LEWIS SPEEDWAY	
Suite, Apt. #, etc. 2201		Suite, Apt. #, etc. 2201	
City & State ST. AUGUSTINE FL		City & State ST. AUGUSTINE FL	
Zip 32084		Zip 32084	
Country U.S.		Country U.S.	
4. FEI Number 20-4029771		☐ Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVE DAYTONA BEACH, FL 32115-2491		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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CD DAVIS, VERNON A 77 DOLPHIN DR ST AUGUSTINE, FL 32080	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD DAVIS, DONNA M 77 DOLPHIN DR ST AUGUSTINE, FL 32080	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD DAVIS, MICHAEL A 77 DOLPHIN DR ST AUGUSTINE, FL 32080	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	_____	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	_____	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	_____	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 register 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:		MICHAEL A. DAVIS	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 1/30/08 (904) 824-3533	

PHONE 904/824-3533
FAX: 904/823-9846
EMAIL: INFO@ADDAVIS.COM
WEBSITE: ADDAVIS.COM



ATTACHMENT

40057025

3940 LEWIS SPEEDWAY
SUITE 2201
ST. AUGUSTINE, FLORIDA 32084

March 31, 2008

Division of Corporations

PO Box 1500

Tallahassee, FL 32302-1500

Reference Number: P05000167668

Enclosed is the fee to file the profit annual/uniform business report.

Check # 699, \$150.00

Please be advised a previous check (#23798) was sent February 8th, 2008, but inadvertently the report was not attached.

If the above mentioned check is located at your office, please return.

Thank you for your time and I apologize for any inconveniences this may have caused.