FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 10 1998 8:00am Secretary of State

1. Corporatio	MEN # P9600 E & DAVIDSON, P.A.	0099038 (7)			
Principal Plac	e of Business	Mailing Address		{	
,		2032 BAYSHORE BLVD			
2032 BAYSHORE BLVD DUNEDIN FL 34698		DUNEDIN FL 34698			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
9 Principal P	Place of Business	2a. Mailing Address		12/05/1996 4. FEI Number	Applied For
21		26		59-3417255	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z ip	Country	71p	Country	8. This corporation owes or has paid the cu	
24	9. Name and Address of Curre	29 29 Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
DA			81 Name	10. Hamis Elle Hadises of Holl Highesters	
DAVIDSON, JOHN N 2032 BAYSHORE BLVD DUNEDIN FL 34698			55 0	(6.0 B. M. (5.1)	·
			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
- 50	11001111 6 0 1000		83		······································
			84 City		85 Zip Code
			1.1	Fl	 ¹
office or r agent. I a SIGNATURE	registored agent, or both, in the Sta im familiar with, and accept the obli-		authorized by the corpora lorida Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	pointment as registered
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	DAVIDSON, JOHN N		1.2 NAME		
STREET ADORESS	2032 BAYSHORE BLVD		1.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL 34698	(- C	1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	21 TITLE		Change Addition
NAME	JAMIESON, HARRY B		2.2 NAME		
STREET ADDRESS	2032 BAYSHORE BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DUNEDIN FL	DELETE	2 4 City-ST-ZIP 3.1 Title		Change Addition
NAME		CJ petiti	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		<u> </u>
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME OTDOORS ADDOORS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		i
CITY-ST-ZIP	certify that the information supplied	with this filma does not qualify	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further of	ertify that the information

indicated on this annual report or supplies with an similar costs for quality for the exemption stated in section 1.19.07(5)(i), notice statutes. Further certify that the information indicated on this annual 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 12 or Block 13 it changed, occur an attachment with an address.