

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 694611

**Entity Name:** DAVIS, SCHNITKER, REEVES & BROWNING, P.A.

**Current Principal Place of Business:**

519 WEST BASE ST.  
MADISON, FL 32340

**Current Mailing Address:**

POST OFFICE DRAWER 652  
MADISON, FL 32341

**FEI Number:** 59-2207374

**Certificate of Status Desired:** No

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

SCHNITKER, CLAY A  
519 WEST BASE STREET  
MADISON, FL 32340 US

*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

**Officer/Director Detail :**

Title	P	Title	VP, SECRETARY, TREASURER
Name	SCHNITKER, CLAY A	Name	REEVES, GEORGE T
Address	519 WEST BASE ST.	Address	519 WEST BASE ST.
City-State-Zip:	MADISON FL 32340	City-State-Zip:	MADISON FL 32340

*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:** CLAY SCHNITKER

**PRESIDENT**

**02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date