

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 144260

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** DAVIS SEAT COVER MANUFACTURING CO.

**Current Principal Place of Business:**

5900 ARLINGTON ROAD  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

5900 ARLINGTON ROAD  
JACKSONVILLE, FL 32211

**New Mailing Address:**

FEI Number: 59-0537983

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARMEL, ROBERT P  
5900 ARLINGTON RD  
JACKSONVILLE, FL 32211 US

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

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

**OFFICERS AND DIRECTORS:**

Title: T  
Name: ARMEL, ROBERT P PRES.  
Address: 8829 RUNNYMEADE RD  
City-St-Zip: JACKSONVILLE,, FL 32257 US

Title: PD  
Name: ARMEL, ROBERT P PRES.  
Address: 8829 RUNNYMEADE RD  
City-St-Zip: JACKSONVILLE,, FL 32257 US

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: ROBERT P ARMEL

PRES

01/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date