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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1997	DIVISION OF	CORPORATION	ONS	Secreta	ary of S	tate
DOCUMENT # 147526 (8) J.B. DAVIS INC.							
,	ice of Business	Mailing Address			I FOEFIET IIJAH DIDII HOERF BRIND HAAND DI	A BABAL BABAL BABAL BABAL BABAL	
420 LAKE SHORE DR 420 LAKE SHORE DR MADISON FL 32340 MADISON FL 32340-274		!					
					3. Date Incorporated or Qualified	3a. Date of Last Re	eport
9 Principal	Place of Business	20 Mailing Address			06/21/1946	04/02/1996	
21 rancipal	Flace of business	2a. Mailing Address			4. FEI Number 59-0555659	harma wie	plied For t Applicable
Suite, Apt	t #, etc.	Suite, Apt #, etc.		····	5. Certificate of Status Desired	□ \$8.75 /	Additional
22 City & Sta	ato	City & State	·····			Fee Re	
23]	one.	28			Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zipi	Country	Zip	Country	/	8. This corporation has liability for	intangible tax under s.	
24	25 9. Name and Address of Cu	29 rrent Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
D/	VIS JR,JAMES B		81	Name	16' transport to you on or or trail the	- Alexoned Marit	
BA	ASE & DUVAL STREET		82	Street Add	dress (P.O. Box Number is Not Acceptat	ble)	
M/	ADISON FL 32340		83			· · · · · · · · · · · · · · · · · · ·	
			84	City		FL 85 Zip C	Code
11. Pursuan	t to the provisions of Sections 607 registered agent, or both, in the S	.0502 and 607.1508, Florida Statu	tes, the above	e-named cor	rooration submits this statement for the r	ourpose of changing its	s registered
			suthorized by	the corners	tion's board of directors. I becoke account	nt the enceintment of	en minternel
agent T	am familiar with, and accept the o	bligations of Section 607.0505, Fi	authorized by orida Statutes	the corpora s.	ation's board of directors. I hereby accept	pt the appointment as	registered
agent i	em familiar with, and accept the o	bligations of, Section 607,0505, Fi	orida Statutes	S.			registered
agent i SIGNATURE	Signature tyle disciprodes bene alregiculo. OFFICERS	clayer and tiled applicable (NO AND DIRECTORS	orida Statutes	S.	ation's board of directors. I hereby acceptive when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	
agent i SIGNATURE 12.	Stand respect to produce here at egic on OFFICERS CEOD	taligations of, Section 607.0505, Fl रोजन्य कार्यसांस्ता application (NO	TE Registered Age 13. 1.1 TiTLE	S.	ured when reinstating)	DATE	
agent i SIGNATURE 12. TITLE MME	OFFICERS CEOD DAVIS JR,JAMES B	clayer and tiled applicable (NO AND DIRECTORS	TE Registered Age 13. 1.1 TITLE 1.2 NAME	S.	ured when reinstating)	DATE CERS AND DIRECTOR	S IN 12
agent T SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD DAVIS JR,JAMES B 420 LAKESHORE DR	clayer and tiled applicable (NO AND DIRECTORS	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET	s. ont signature requ ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR	S IN 12
Agent I SIGNATURE 12. THE NAME STREET ADDRESS DITY-SY-ZPP	OFFICERS CEOD DAVIS JR,JAMES B	clayer and tiled applicable (NO AND DIRECTORS	TE Registered Age 13. 1.1 TITLE 1.2 NAME	s. ont signature requ ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR	S IN 12
agent I SIGNATURE 12. THE NAME STREET ADDRESS CITY ST. ZIP THE NAME	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O	oligations of, Section 607,0505, Fl	TE Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	s. ont signature requ ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change	S IN 12
agent I SIGNATURE 12. TITLE NAME STREET ADDRESS TOLE NAME STREET ADDRESS	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR	oligations of, Section 607,0505, Fl	TE Propistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS T-ZIP ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change	S IN 12
agent i SIGNATURE 12. THE NAME STREET ADDRESS	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O	oligations of, Section 607,0505, Fl	TE Propistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	ADDRESS T-ZIP ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change	S IN 12 Addition Addition
agent I SIGNATURE 12. THE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE TITLE	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL	colligations of, Section 607,0505, FI	TE Propistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS T-ZIP ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change	S IN 12
agont I SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, MARTHA T D DAVIS, ALBERT T 420 LAKESHORE DR	colligations of, Section 607,0505, FI	TE Fragistered Age 13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 Title 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change	S IN 12 Addition Addition
AGONT I SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-ZP	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL	DELETE	TE Fregistered Age 13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change	S IN 12 Addition
ASJORNATURE 12. THE NAME STREEL ADDRESS CITY - ST- ZIP TITLE NAME STREEL ADDRESS CITY - ST- ZIP TITLE NAME STREEL ADDRESS CITY - ST- ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL	colligations of, Section 607,0505, FI	TE Frogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 TITLE 4.1 TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change	S IN 12 Addition Addition
AGONT I SIGNATURE 12. 131.	CEOD DAVIS JR,JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III	DELETE	TE Fregistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition
AGONT I SIGNATURE 12. DILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	CEOD DAVIS JR,JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR	DELETE	TE Fragistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.3 STREET 4.4 CITY-S 4.4 CITY-S 4.5 NAME 4.5 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition
AGONT I SIGNATURE 12. DILE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS	CEOD DAVIS JR,JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III	DELETE	TE Fregistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition
AGONT I SIGNATURE 12. 131.	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D	DELETE	TE Frogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S 4.4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition Addition
AGONT I SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THEE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR	DELETE	TE Fregistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition Addition
AGONT I SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THEE STREET ADDRESS CITY-ST-ZIP	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL	DELETE DELETE DELETE	TE Fregistered Age 13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change Change	S IN 12 Addition Addition Addition Addition Addition
AGONT I SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE	OFFICERS CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL VD	DELETE	TE Frogistered Age 13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 6.4 CITY-S 6.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change	S IN 12 Addition Addition Addition
AGONT I SIGNATURE 12. 131.	CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL D DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL VO DAVIS, HENRY N	DELETE DELETE DELETE	TE Frogistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change Change	S IN 12 Addition Addition Addition Addition Addition
AGONT I SIGNATURE 12. DITE MAME STREET ADDRESS CITY ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP	OFFICERS CEOD DAVIS JR, JAMES B 420 LAKESHORE DR MADISON FL STD DAVIS, MARTHA O 420 LAKESHORE DR MADISON FL D DAVIS, ALBERT T 420 LAKESHORE DR MADISON FL PO DAVIS, JAMES B III 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL D SAUNDERS, MARTHA D 420 LAKESHORE DR MADISON FL VD DAVIS, HENRY N 420 LAKESHORE DR MADISON FL	DELETE DELETE DELETE DELETE	TE Fregistered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 6.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-S 6.4 CITY-S 6.5 TITLE 6.5 NAME 6.5 STREET 6.4 CITY-S 6.5 TITLE 6.5 NAME 6.6 STREET 6.6 STREET 6.6 STREET 6.6 STREET 6.7 STREET 6.7 STREET 6.8 STREET 6.9 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ured when reinstating)	DATE CERS AND DIRECTOR Change Change Change Change	S IN 12 Addition Addition Addition Addition Addition

appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Dayt-me Phone #

FILED

Mar 03 1997 8:00am