

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 28 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 390042

1. Corporation Name

DAVIS CONST. & DEV., INC.

2. Principal Office Address

1830 ATLANTA AVE

Suite, Apt. #, etc.

City & State

ORLANDO

Zip 32806

FLA.

Country

US

3. Mailing Office Address

- SAME -

Suite, Apt. #, etc.

City & State

REINSTATEMENT 01-05

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-1379030

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DANIEL H. DAVIS

Street Address (P.O. Box Number is Not Acceptable)

1830 ATLANTA AVE.

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32806

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Daniel H. Davis

REGISTERED AGENT MUST SIGN

Date 1-28-05

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PR	DANIEL H DAVIS	1830 ATLANTA AVE.	ORLANDO, FLA 32806

500045592615

01/28/05--01002--014 **750.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Daniel H. Davis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-05 407 425-0879

Date

Daytime Phone #

CR2E081 (01/04)

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DAVIS CONSTRUCTION & DEV., INC.
1830 ATLANTA AVE.
ORLANDO FLA. 32806

DOC. # 390042

I DID NOT RECEIVE A NOTICE ON MY
CORPORATE CHARGES IN 2001. I WISH TO
HAVE MY FEES WAIVED. THANK YOU.

DANIEL H. DAVIS *Daniel H. Davis*
PRES.