

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 453651

FILED
Feb 20, 2007
Secretary of State

Entity Name: DAVIDSON VENTURES, INC.

Current Principal Place of Business:

272 FLEMING DR.
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8321
ORANGE PARK, FL 32060010 US

New Mailing Address:

FEI Number: 59-1552241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, GUY A
418 WALNUT STREET
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

DAVIDSON, GUY A
272 FLEMING DRIVE
GREEN COVE SPRINGS, FL 32043 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:

02/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: DAVIDSON, WILBUR H
Address: 272 FLEMING DR
City-St-Zip: GREEN COVE SPRINGS, FL

Title: VTD () Delete
Name: DAVIDSON, JOYCE
Address: 272 FLEMING DR
City-St-Zip: GREEN COVE SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILBUR H. DAVIDSON

PSD

02/20/2007

Electronic Signature of Signing Officer or Director

Date