

2000 UNIFORM BUSINESS REPORT (UBR)

PAID AT L
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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 531154

1. Entity Name
PHILIP H. DAVIDSON, INC.

Principal Place of Business 13477 ELYSIUM BLVD. MOUNT DORA FL 32757	Mailing Address 13477 ELYSIUM BLVD. MOUNT DORA FL 32757
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1738359	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVIDSON, PHILIP H.
1245 BAYSHORE DR.
ENGLEWOOD FL 33533**

Name Philip H DAVIDSON
Street Address (P.O. Box Number is Not Acceptable) 1347 ELYSIUM BLVD
City MT DORA FL Zip Code 32757

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIDSON, DIANNE 1347 ELYSIUM BLVD. MOUNT DORA FL 32757	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DAVIDSON, PHILIP H. 1245 BAYSHORE DR. ENGLEWOOD FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	600003384446--9 -09/06/00--01110--016 ****150.00 ****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1347 ELYSIUM BLVD MT DORA FL 32757	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **8-14-2000** Daytime Phone #: _____

CR2E034 (9/99)

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PHILIP DAVIDSON INC.

SPECIALIST IN THE
BUYING AND LIQUIDATING
OF CLOSEOUT AND EXCESS
INVENTORIES

1347 Elysium Blvd.
Mt. Dora, Florida 32757
E-Mail Address:
deals777@aol.com

Phone 352-385-0250
Car 407-592-9033
Fax 352-385-0251

Florida Department Of State
Division of corporations

August 14 2000

Regarding corporation named Philip Davidson Inc. Document # 531154

We have recently lost our company secretary, and have now found ,in going thru our records, that she has failed to pay our Florida Corporation fee. I called your office today to confirm that it had not been paid. I told them we had discovered the renewal form in our files and it appeared that it had not been paid..

Your office told me to immediately send in the form and \$ 150.00 which is enclosed.

Thank you for taking care of this for me and if you have any questions, please call me at 352-385-0250

Also the address of the registered agent and the address, under President should both be changed to the 1347 Elysium Blvd Mt Dora Florida 32757.

Possibly she saw this old address and thought it was a form for the prior year?

Thank you again for your resolving this matter

Philip H Davidson inc

Philip Davidson President

