

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 549019

Entity Name: DAVIS-CLARKE, INC.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

4140 US HWY 19
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

6333 RIVER ROAD
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

4140 US HWY 19
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

6333 RIVER ROAD
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-1776255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, KENNETH M
4939 FLORAMAR TERRACE
#906
NEW PORT RICHEY, FL 34652 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDERSON, KENNETH M
Address: 4939 FLORAMAR TERRACE, #906
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S () Delete
Name: ANDERSON, KENNETH M
Address: 4939 FLORAMAR TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S (X) Delete
Name: ANDERSON, KAREN
Address: 4939 FLORAMAR TERR, #906
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: ANDERSON, KAREN
Address: 4939 FLORAMAR TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34652

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

I hereby certify that the information supplied with this filing does not qualify 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: KENNETH M ANDERSON

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date