

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006723

FILED
Jan 05, 2008
Secretary of State

Entity Name: E. DAVIS ENTERPRISES, INC.

Current Principal Place of Business:

5569 HALIFAX COURT
DENVER, CO 80249

New Principal Place of Business:

Current Mailing Address:

5569 HALIFAX COURT
DENVER, CO 80249

New Mailing Address:

FEI Number: 55-0862257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
3155 E. PATRICK LANE SUITE 1
LAS VEGAS, LAS VEGAS, FL 89120 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: DAVIS, EDWARD
Address: 3155 E. PATRICK LANE, SUITE 1
City-St-Zip: LAS VEGAS, NV 89120

Title: S () Delete
Name: DAVIS, OLYMPIA
Address: 3155 E. PATRICK LANE, SUITE 1
City-St-Zip: LAS VEGAS, NV 89120

Title: D () Delete
Name: WRIGHT, TENERA
Address: 3155 E. PATRICK LANE, SUITE 1
City-St-Zip: LAS VEGAS, NV 89120

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: O () Change (X) Addition
Name: DAVIS, NIKI
Address: 3155 E. PATRICK LANE, SUITE 1
City-St-Zip: LAS VEGAS, NV 89120

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: NIKI DAVIS

O

01/05/2008

Electronic Signature of Signing Officer or Director

_____ Date