2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007532

Entity Name: J T DAVENPORT & SONS, INC.

FILED Jul 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1144 BROADWAY ROAD SANFORD, NC 273329793					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1144 BROADWAY ROAD SANFORD, NC 273329793					
FEI Number:	56-0514693	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
Electronic Signature of Registered Agent Date					
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C ()EDAVENPORT, JR 822A FITTS ST SANFORD, NC 2		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCP () E DAVENPORT, MA 300 CARBONTON SANFORD, NC 2	N RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D DAVENPORT, JE 822A FITTS ST SANFORD, NC 2		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () DAVENPORT, III, 6173 DEEP RIVE SANFORD, NC 2	R ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()E HAVENS, THEOD 850 CREEKWOO SANFORD, NC 2	DD RD	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	T () E DAVENPORT, TO 2081 SANDY CR SANFORD, NC 2	EEK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
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: THEODORE A. HAVENS

Electronic Signature of Signing Officer or Director

07/02/2009 Date

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