

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F29023

Entity Name: DAVDON, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

HARPER, VAN SCOIK & CO.
2111 DREW STREET
CLEARWATER, FL 33765 US

Current Mailing Address:

2850 HALL'S CHAPEL ROAD
BURNSVILLE, NC 287146743 US

New Principal Place of Business:

CARR, RIGGS & INGRAM LLC
2111 DREW STREET
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2075073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURTON, DAVID D.
2111 DREW STREET
CLEARWATER, FL 33765 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: PST () Delete
Name: WALKER, DONALD L,
Address: 2850 HALLS CHAPEL ROAD
City-St-Zip: BURNSVILLE, NC 287146743

Title: VP () Delete
Name: WALKER, KAREN KL
Address: 2850 HALL' S CHAPEL RD
City-St-Zip: BURNSVILLE, NC 287146743

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 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: KAREN WALKER

VP

02/04/2009

Electronic Signature of Signing Officer or Director

_____ Date