

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G64493

FILED  
Jul 24, 2008  
Secretary of State

**Entity Name:** DAVIDSON & ASSOCIATES TAX & FINANCIAL SERVICES COMPANY

**Current Principal Place of Business:**

3329 NW 55TH STREET  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

2000 NW 44TH STREET  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

3329 NW 55TH STREET  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 59-2326688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVIDSON, TIMOTHY R.  
2000 NW 44TH STREET  
FORT LAUDERDALE, FL 33309 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

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 DIRECTORS:**

Title: DP ( ) Delete  
Name: DAVIDSON, TIMOTHY R.  
Address: 2000 NW 44TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: DVP ( ) Delete  
Name: DAVIDSON, KATHRYN P.,  
Address: 2000 NW 44TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: CARROLL, JOSEPH C III  
Address: 2118 WEST LEGACY CIR  
City-St-Zip: CEDAR CITY, UT 84720

Title: DVP ( ) Delete  
Name: RHEA, MICHAEL T  
Address: 228 JOHN HELTON  
City-St-Zip: MARYVILLE, TN 37804

**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: ( ) 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: TIMOTHY DAVIDSON

DP

07/24/2008

Electronic Signature of Signing Officer or Director

Date