## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: MUL

## **FILED** May 03, 2004 08:00 AN

DOCUMENT # H73565  1. Entity Name JR. DAVIS CONSTRUCTION COMPANY, INC.	Secretary of	State
Principal Place of Business Mailing Address 210 S HOAGLAND BLVD KISSIMMEE, FL 34741 KISSIMMEE, FL 34741		
DO NOT WRITE IN THIS SPA	4. FEI Number	3) Applied For Not Applicable
DAVIS, JAMES B., JR. 210 S HOAGLAND BLVD KISSIMMEE, FL 34741	DO NOT WRITE IN THIS SPACE	wise
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature specific date of Florida agent with applicable.  (NOTE Registered Agent signature registered when rehistoling)  PAIE  FILE NOWIII FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be		
After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution	n. Added to Fees	
10. OFFICERS AND DIRECTORS  TITLE PD  NAME DAVIS, JAMES B. JR.  STREET ADDRESS 210 SOUTH HOAGLAND BLVD.  KISSIMMEE, FL 34741  TITLE ST  NAME DAVIS, TAMA R  STREET ADDRESS 210 S. HOAGLAND BLVD.  KISSIMMEE, FL 34741	U0000D153907 US/04/04-80144-007 19	i8. 75
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE		
NAME STREET ADDRESS CITY-ST-ZIP	womalion stated in Section 110 (7/2)(2) Standar States (1.1)	information.
12. I hereby certify that the information supplied with this filling does not quality for the en indicated on this report or supplier tental report is true and accurate and that my sign of the corporation or the receiver or trustee emplowered to execute this report as requested, or on an attachment with an address, with all other like empowered.	kemption stated in Section 119,07(3)(i), Florida Statutes, I further certify that the nature shall have the same legal effect as if made under oath, that I am an office juired by Chapter 607, Florida Statutes; and that my name appears in Block 10 Tama R. Davis	e information per or director or Block 11 if

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR