2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# H94891

Entity Name: DAVIS, DAVIS & DAVIS, INC.

Current Principal Place of Business:

101 S MAIN ST
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

101 S MAIN ST
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 65-0038094 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, JOHNNY L.
1501 NW AVENUE
BELLE GLADE, FL 33430 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: CB ( ) Delete
Name: DAVIS, JOHNNY L.,
Address: 1501 NW AVENUE
City-St-Zip: BELLE GLADE, FL

Title: ST ( ) Delete
Name: DAVIS, SHARANDA S
Address: 1501 NW AVENUE
City-St-Zip: BELLE GLADE, FL

Title: P ( ) Delete
Name: DAVIS, BARBARA G,
Address: 1501 N W AVENUE
City-St-Zip: BELLE GLADE, FL

Title: VP ( ) Delete
Name: DAVIS, ASHLEY M
Address: 1501 NW AVENUE
City-St-Zip: BELLE GLADE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition
Name: DAVIS, BARBARA G,
Address: 1501 N W AVENUE
City-St-Zip: BELLE GLADE, FL

Title: P (X) Change ( ) Addition
Name: DAVIS, ASHLEY M
Address: 1501 NW AVENUE
City-St-Zip: BELLE GLADE, FL

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: JOHNNY L DAVIS CB 04/30/2008

Electronic Signature of Signing Officer or Director Date