2001 UNIFORM BUSINESS REPORT (UBR)						FILED Jan 10, 2001 8:00 am					
DOCUMENT # J19200			ق ج			Jan 10, 2001 8:00 am Secretary of State					
1. Entity Name			.^	.e.		Secre	tary	01 5	tate		
HENHY L	DAVIS HOUSE, INC.					01-10-20	01 90003	037 ***1	58.75		
Principal Place	e of Business	Mailing Address			-						
7717 02000 7.0		4711 BEGGS RD			1						
4711 BEGGS ROAD ORLANDO FL 32810		4711 BEGGS ROAD ORLANDO FL 32810				8.5	0071	Š			
US		US							1)1 1)		
2. Principal Place of Business		3. Mailing Address	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRIT	E IN THIS SP	ACE		- 1991 - 1991 - 1991	
City & State		City & State			4. F	FEI Number 59-269455)		olied For Applicable		
Zip	Country	Zip	Cour	otry	5. (Certificate of Status Desired	\$	8.75 Addi	tional		
	6. Name and Address of Curren	it Registered Agent	L		7. N	Name and Address of New R	egistered Ag	jent			
	۱۳:۵۰ میرسموست د سپرمیسا در تا	المستديد المرسود المستوالية	÷ -•	Name		مده ۸ د مخد	·	-	· .		
GODZIK, SANDRA J. 4711 BEGGS ROAD				Street Addre	ss (P.O. B	Box Number is Not Acceptable	:)				
	ANDO FL 32810										
				City			FL	Zip Code			
				and office or too	intered an	neet, or both, in the State of Flo		<u> </u>			
8. The above	named entity submits this statement	for the purpose of changing its	regisiei	ed office of regi	istered ag	gent, or boun, in this otale of the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registere	ed Agent signature rec	quired when re	einstating)	DATE				
9. This corpo		IS \$150.00 will be \$550.0	00	Election Campaign Fir Trust Fund Contribution			May Be to Fees				
	requirement and elects to do so.	Make Check Payal			State			•			
11.	OFFICERS AN		12,		AC	DDITIONS/CHANGES TO OFF		DIRECTORS Change	N 11 ☐ Addition	(c)	
TITLE NAME .	P Godzik, Frank D.	☐ Delete	TITL NAM					Change		CR2E034 (10/00)	
STREET ADDRESS	4711 BEGGS ROAD		STR	EET ADDRESS						034	
CITY-ST-ZIP	ORLANDO FL			Y-ST-ZIP				Change	Addition	RZE	
TITLE	VTD GODZIK, SANDRA J.	Delete	TITL NAM					☐ Change	□ Madition	O	
NAME STREET ADDRESS	4711 BEGGS ROAD			REET ADDRESS						4	
CITY-ST-ZIP	ORLANDO FL		CIT	Y-ST-ZIP				Change	Addition	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE	S CHOCK CARIDAD	☐ Delete	TITE	i i				[] Change	☐ Addition		
NAME STREET ADDRESS:	SUGGS, CARIDAD	e		REET ADDRESS		was s					
CITY-ST-ZIP	ORLANDO FL 32810		CIT	Y-ST-ZIP				Channe	Addition		
TITLE		☐ Delete	TITI NAM					Change	☐ Audition		
NAME STREET ADDRESS	}			REET ADDRESS							
CITY-ST-ZIP			CIT	Y-ST-ZIP							
TITLE		☐ Delete	TITI Naj					☐ Change	☐ Addition		
NAME STREET ADDRESS				REET ADDRESS						1-1	
CITY-ST-ZIP	·		CIT	Y-ST-ZIP					ED Ad Pro-		
TITLE		☐ Delete	TiŢ	1				☐ Change	Addition Addition	1 1 '	
NAME STREET ADDRESS			NAI Ste	REET ADDRESS							
CITY-ST-ZIP				Y-ST-ZIP						4	
13. I hereby indicated of the col	certify that the information supplied w d on this report or supplemental repor rporation or the receiver or trustee en , or on an attachment with an addres	with this filing does not qualify to t is true and accurate and that inpowered to execute this repor-	or the ex- my sign: t as requ	emption stated ature shall have uired by Chapte	in Section the same r 607, Flor	119.07(3)(i), Florida Statutes legal effect as if made under rida Statutes; and that my nan	I further cert oath; that I a ne appears in	ity that the in m an officer Block 11 o	ntormation or director r Block 12 if		
changed	, or on an attack tieft with an addies	Salar Salar Salar	νω _\	1 Can	ساد	ا ٨ــــــــــــــــــــــــــــــــــــ	407 9	91-0	1911		
SIGNAT	SIGNATURE AND TYPED O	RPRINTED NAME OF SIGNING OFFICE	R OR DIREC	CTOR	V	Date	Di	ytime Phone #			