

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J66688 (9)  
1. Corporation Name  
DAVIS ADVERTISING, INC.



Principal Place of Business  
10575 68TH AVENUE N., SUITE C-1  
SEMINOLE FL 34842

Mailing Address  
10575 68TH AVENUE N., SUITE C-1  
SEMINOLE FL 33772-6023

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/06/1987		3a. Date of Last Report 04/23/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2779538		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DAVIS, PHILLIP J. <del>6574 113TH AVE.</del> 11350 GROVE ST. SEMINOLE FL <del>33542</del> 33772				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	P, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAVIS, PHILLIP J.			1.2 NAME	DAVIS, Phillip J.		
STREET ADDRESS	6574 113TH AVE.			1.3 STREET ADDRESS	11350 GROVE ST.		
CITY-ST-ZIP	SEMINOLE FL 33772			1.4 CITY-ST-ZIP	SEMINOLE, FL 33772		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DAVIS, MICHELLE M.			2.2 NAME	SUSAN Romapchuk		
STREET ADDRESS	6574 113TH AVE.			2.3 STREET ADDRESS	401 Rosery Rd NE #285		
CITY-ST-ZIP	SEMINOLE FL			2.4 CITY-ST-ZIP	LARGO, FL 33770		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				3.2 NAME	JEFFREY LEDGERWOOD		
STREET ADDRESS				3.3 STREET ADDRESS	5300 Bayshore Blvd. # B2		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	Tampa, FL 33611		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				4.2 NAME	CHUCK DANILOWSKI		
STREET ADDRESS				4.3 STREET ADDRESS	300 N. Washington Ave		
CITY-ST-ZIP				4.4 CITY-ST-ZIP	CLEARWATER, FL 34615		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Phillip J. Davis* 4/21/97 391-2431

CR2E034 (9/96)