FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State PHONOROGO CONTROL OF THE PROPERTY OF THE PROPE **1996** 446 DOCUMENT # Corporation Name DAVIDSON SQUARE CORPORATION Principal Place of Business Maifing Address % DONALD H. WILSON, JR. % DONALD H. WILSON, JR 150 EAST DAVIDSON STREET 150 EAST DAVIDSON STREET BARTOW FL 33830 BARTOW FL 33830 ate Incorporated or Qualified 03/13/1989 3a. Date of Last Report 05/01/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2952358 26 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees 8. This corporation has liability for intangible tax under s 199.032. Country Country Zip Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WILSON, DONALD H., JR. Street Address (P.O. Box Number is Not Acceptable) 82 150 EAST DAVIDSON STREET BARTOW FL 33830 83 Zip Code 84 City 85 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am facultur with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signature, typed or printed name of regulared agent and title if applicable (NCI1). Registered Agent signature required when remutating CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1 1 TITLE III.F STIDHAM, WOFFORD H. 1.2 NAME MMh 150 EAST DAVIDSON ST. 1.3 STREET ADDRESS SPEELL ADDRESS **BARTOW FL** Č(EY+S1+20 14 CHY-ST-ZIP ☐ Addition DELETE 2.1 Tille Change THEF CONNER, DABNEY L. 2.2 NAME NAME 150 EAST DAVIDSON ST. 2.3 STREET ADORESS \$1REEL ADDRESS BARTOW FL 2.4 C(TY+ST+Z)P CHY SI-74P [DELETE ☐ Change ■ Addition 3 1 THEF 1 Iti WILSON, DONALD H., JR. NAME T 2 NAME 150 EAST DAVIDSON ST. 3.3 STREET ADDRESS STREET ACORESS ARTOW FL 3.4 C/TY - ST - Z/P 001-51-70 DELFTE Change Addition HU 4 1 TITLE NAME 4.2 NAME STEEL LADDRESS 4.3 STREET ADDRESS 4.4 CHTY - ST - ZIP CITY ST ZIE DELETE Change Addition 5 1 Tille THEF 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP £01Y - \$1 - Z0P Change Addition DELETE 6 1 TILLE hite! 6.2 NAME NAM: 6.3 STREET ADDRESS STREET ADDRESS 64 DITY-ST-ZIP CHY-S* ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exempt on stated in Section 119 07(3)(k). 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