

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 22, 2004 8:00 am**  
**Secretary of State**

04-22-2004 90358 032 \*\*\*\*50.00

**DOCUMENT # L02000012064**

1. Entity Name

DAVIS CAMPAIGN RESOURCES, LLC



Principal Place of Business

1410 SPANISH MAIN ST  
TAMPA FL 33609-3518

Mailing Address

1410 SPANISH MAIN ST  
TAMPA FL 33609-3518

2. Principal Place of Business

3314 Henderson Blvd.

Suite, Apt. #, etc.

Suite 100K

City & State

Tampa Florida

Zip

33609

Country

USA

3. Mailing Address

3314 Henderson Blvd.

Suite, Apt. #, etc.

Suite 100K

City & State

Tampa Florida

Zip

33609

Country

USA



MOORE

CR2E083 (11/03)

4. FEI Number

26-3843643

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, LEA LAVOIE  
730 SOUTH STERLING AVENUE STE. 109  
TAMPA FL 33609

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3314 Henderson Blvd.

Suite 100K

City  
Tampa

FL

Zip Code  
33609

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

*Lea Davis*

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

4-20-04

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2004**

9. MANAGING MEMBERS / MANAGERS

TITLE MGR ☐ Delete  
NAME DAVIS, LEA  
STREET ADDRESS 1410 SPANISH MAIN ST  
CITY-ST-ZIP TAMPA FL 33609-3518

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3314 Henderson Blvd. Suite 100K  
CITY-ST-ZIP Tampa, FL 33609

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

*Lea Davis*

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE)

4-20-04

Date

(813) 870-0231

Daytime Phone #