

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF REVENUE
JENNIFER B. MCDONALD
Secretary of State
DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS
95 MAY 25 PM 12:02

DOCUMENT # L20058 (8)

1. Corporation Name

DAVLIN ENTERPRISES, INC.

Principal Place of Business

**3290 SW 2ND COURT
DEERFIELD BEACH FL 33442**

Mailing Address

**3290 SW 2ND COURT
DEERFIELD BEACH FL 33442**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/02/1989

3a. Date of Last Report
04/14/1994

2. Principal Place of Business

21 1406 AKEN STREET

2a. Mailing Address

26 1406 AKEN STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 PORT CHARLOTTE, FL

City & State

27 PORT CHARLOTTE, FL

Zip

Country

Zip

Country

24 33952

25 CHARLOTTE

29 33952

30 CHARLOTTE

4. FBI Number
65-0187545

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**FERGUSON, LINDA G.
3290 SW 2ND COURT
DEERFIELD BEACH FL 33442**

10. Name and Address of New Registered Agent

81 Name

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

1406 AKEN STREET

83

84 City

PORT CHARLOTTE

FL

85

Zip Code

33952

11. Pursuant to the provisions of Sections 607.0503 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, if 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

Linda G. Ferguson

LINDA G. FERGUSON

5/20/95

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	FERGUSON, LINDA G.
STREET ADDRESS	3290 SW 2ND COURT
CITY - ST - ZIP	DEERFIELD BEACH FL
TITLE	VSD
NAME	FERGUSON, DAVID S.
STREET ADDRESS	3290 SW 2ND COURT
CITY - ST - ZIP	DEERFIELD BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	1406 AKEN STREET
1.4 CITY - ST - ZIP	PORT CHARLOTTE, FL 33952
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	1406 AKEN STREET
2.4 CITY - ST - ZIP	PORT CHARLOTTE, FL 33952
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(d), 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, unchanged, or on an attachment with an address.

SIGNATURE:

Linda G. Ferguson

(Signature and typed or printed name of signing officer or director)

5/20/95 813-625-1102