

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001105

FILED
Jan 09, 2009
Secretary of State

Entity Name: THE DAVIS PRODUCTIVITY AWARDS FOUNDATION, INC.

Current Principal Place of Business:

106 N BRONOUGH ST
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

106 N BRONOUGH ST
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3709411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CALABRO, DOMINIC M
106 N BRONOUGH ST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BARNETT, HOYT R
Address: PUBLIX SUPERMARKETS INC., PO BOX 407
City-St-Zip: LAKELAND, FL 33802

Title: TC () Delete
Name: JENNINGS, MICHAEL A
Address: 701 SAN MARCO BLVD, 12TH FLORR
City-St-Zip: JACKSONVILLE, FL 32207

Title: TP () Delete
Name: CALABRO, DOMINIC M
Address: 106 N BRONOUGH ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: T () Delete
Name: OHLINGER, CHARLES T
Address: 400 N ASHLEY DR STE 1775
City-St-Zip: TAMPA, FL 33602

Title: T () Delete
Name: SULLIVAN, CHRIS
Address: 2202 N WESTSHORE BLVD 5TH FLOOR
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TC (X) Change () Addition
Name: SMITH, DAVID A
Address: 4345 SOUTHPOINT BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: TC (X) Change () Addition
Name: JENNINGS, MICHAEL A
Address: P.O. BOX 4579
City-St-Zip: JACKSONVILLE, FL 322310038

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PAREIGIS, SUSAN
Address: 400 N. ASHLEY DRIVE, SUITE 1775
City-St-Zip: TAMPA, FL 33602

Title: T (X) Change () Addition
Name: STORY, SUSAN N
Address: ONE ENERGY PLACE
City-St-Zip: PENSACOLA, FL 32520

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOMINIC M, CALABRO

TP

01/09/2009

Electronic Signature of Signing Officer or Director

Date