

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

APPROVE  
AND  
FILED

06 MAY -3 PM 12:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N04000005158

1. Entity Name  
JIM DAVIS FOR CONGRESS, INC.



Principal Place of Business  
3907 WEST MCKAY STREET  
TAMPA, FL 33609

Mailing Address  
3907 WEST MCKAY STREET  
TAMPA, FL 33609



2. Principal Place of Business  
3508 W. GRACE ST.

3. Mailing Address  
2203 N. LOIS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
TAMPA, FL

City & State  
TAMPA, FL

Zip  
33607

Country  
USA

Zip  
33607

Country  
USA

04192006 REIN-NP

CR2E099 (11/05)

4. FEI Number  
20-1160447

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HERRON, MARK  
215 SOUTH MONROE STREET  
SUITE 701  
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name  
MARC D. SASSER

Street Address (P.O. Box Number is Not Acceptable)  
2203 N. LOIS AVE.

#700

City  
TAMPA

FL

Zip Code  
33607

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

*Marc D. Sasser*

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

(NOTE: Registered Agent signature required when reinstating)

4/19/06  
DATE

FILE NOW!!! FEE IS \$297.50

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
DAVIS, JIM  
STREET ADDRESS  
CITY-ST-ZIP  
3709 WEST MCKAY STREET  
TAMPA, FL 33609

☐ Delete

TITLE  
NAME  
BRILL, JONATHAN  
STREET ADDRESS  
CITY-ST-ZIP  
3709 WEST MCKAY STREET  
TAMPA, FL 33609

☐ Delete

TITLE  
NAME  
SASSER, MARC  
STREET ADDRESS  
CITY-ST-ZIP  
3709 WEST MCKAY STREET  
TAMPA, FL 33609

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

100075377221  
05/26/06--01047--005 \*\*297.50

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Marc D. Sasser*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/06  
Date

813 875 7774  
Daytime Phone #

5/10