2007 FOR PROFIT CORPORATION

GENEVA, AL 36354-0760

FILED Apr 09, 2007 08:00 A Secretary of State

ANNUAL REPORT		
DOCUMENT # P00000101475 1. Entity Name R&C DAVIS ENTERPRISES, INC.		
TOO DAVIO ENTERNINIDEO	,	
Principal Place of Business	Mailing Address	
1393 MORRISON RD	PO BOX 760	



CR2E034 (11/05) No Cha-P 01092007 DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 59-3667759 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ELLENBURG, LISA DO NOT WRITE 1136 ENGLISH LANE WESTVILLE, FL 32464 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DAVIS, RUDOLPH NAME STREET ADDRESS 1393 MORRISSON ROAD U00000693999 04/16/07-80063-005 150.00 CITY-ST-ZIP WESTVILLE, FL 32464 TITLE DAVIS, CLARA 1393 MORRISSON ROAD STREET ADDRESS CITY+ST-ZIP WESTVILLE, FL 32464 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation of the receive changed, or on an attachment

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

WESTVILLE, FL 32464