

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000007844

1. Entity Name
DAVIS ROAD, INC.



FILED

04 APR 29 PM 12:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01292004 Chg-P CR2E034 (10/03)

4. FEI Number
80-0037592

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, MICHAEL E
301 E. PINE ST., STE. 1400
ORLANDO, FL 32801

Name GARY V. CARDAMONE

Street Address (P.O. Box Number is Not Acceptable)
4051 W. STATE ROAD 46

City SANFORD

FL

Zip Code 32771

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

GARY V. CARDAMONE

4/26/04

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME CARDAMONE, GARY V
STREET ADDRESS 4051 W. STATE RD. 46
CITY-ST-ZIP SANFORD, FL 32771

TITLE D,P,T,S ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

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

12. 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 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 607, 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:

GARY V. CARDAMONE,
PRESIDENT

Date

407-321-5811

Daytime Phone #