

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # P03000032553

1. Entity Name
DAVIDSON SIGN SERVICES, INC.



Principal Place of Business
**1201-B CEDAR ST
SAFETY HARBOR, FL 34695**

Mailing Address
**1201-B CEDAR ST.
SAFETY HARBOR, FL 34695**



04152008 No Chg-P CR2E034 (11/05)

4. FEI Number
05-0559841

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DAVIDSON, MILDRED L
1201-B CEDAR ST
SAFETY HARBOR, FL 34695**

**DO NOT WRITE
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)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**U000000909057
05/06/08-80053-024 150.00**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DAVIDSON, RICHARD P
STREET ADDRESS	2401 MOORE HAVEN DRIVE WEST
CITY- ST- ZIP	CLEARWATER, FL 33763

TITLE	VD
NAME	DAVIDSON, DANIEL B
STREET ADDRESS	1983 OTTER WAY
CITY- ST- ZIP	PALM HARBOR, FL 34695

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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:

Richard P. Davidson **Richard P. Davidson** 4/15/08 727-726-3555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #