

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049693

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: M.L. DAVIS CONSTRUCTION, INC.

## Current Principal Place of Business:

4744 IRONWOOD PT.  
INVERNESS, FL 34450 US

## New Principal Place of Business:

3615 S. PLOVER ST.  
INVERNESS, FL 34450 US

## Current Mailing Address:

P.O. BOX 22  
FLORAL CITY, FL 34436 US

## New Mailing Address:

P.O. BOX 564  
INVERNESS, FL 34451 US

FEI Number: 83-0355713

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, MAX L  
4744 IRONWOOD PT  
INVERNESS, FL 34450 US

## Name and Address of New Registered Agent:

DAVIS, MAX L  
3615 S. PLOVER ST.  
INVERNESS, FL 34450 US

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: MAX L. DAVIS

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DAVIS, MAX L  
Address: 4744 IRONWOOD PT.  
City-St-Zip: INVERNESS, FL 34450 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DAVIS, MAX L  
Address: 3615 S. PLOVER ST.  
City-St-Zip: INVERNESS, FL 34450 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAX L. DAVIS

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

Date