

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # P03000082801

1. Entity Name
EDWIN DAVIS TRUCKING, INC.



Principal Place of Business
2290 CATTLE DRIVE
BONIFAY, FL 32445

Mailing Address
P O BOX 1134
BONIFAY, FL 32425



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-3686045
Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

KINGRY, REX
116 PARIDISO PLACE
PANAMA CITY BEACH, FL 32413

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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 re-registering) **DATE** _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, JERRY E 2290 CATTLE DRIVE BONIFAY, FL 32445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVIS, WILLIAM E 2290 CATTLE DRIVE BONIFAY, FL 32445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIS, BONNIE J 2290 CATTLE DRIVE BONIFAY, FL 32445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, BONNIE J 2290 CATTLE DRIVE BONIFAY, FL 32445
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04/24/07-80067-011 150.00

**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:

Jerry E. Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY E. DAVIS

3/2/07

Date

850-547-7331

Daytime Phone #