

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029031

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** NORTHSIDE TAVERN CORPORATION

**Current Principal Place of Business:**

647 HWY 17 NORTH  
PALATKA, FL 32177

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1103  
EAST PALATKA, FL 32131

**New Mailing Address:**

**FEI Number:** 80-0098013

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BANKS, PATRICIA K  
519 CRILL AVENUE  
PALATKA, FL 32177 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DAVIS, EDWARD  
Address: 29181 MARK AVE  
City-St-Zip: MADISON HEIGHTS, MI 48071 US

Title: VP  
Name: DAVIS, KEITH G  
Address: PO BOX 1103  
City-St-Zip: EAST PALATKA, FL 32131 US

Title: S  
Name: DAVIS, KEITH G  
Address: PO BOX 1103  
City-St-Zip: EAST PALATKA, FL 32131

Title: D  
Name: DAVIS, EDWARD  
Address: 29181 MARK AVE.  
City-St-Zip: MADISON HEIGHTS, MI 48071 US

Title: D  
Name: DAVIS, KEITH G  
Address: PO BOX 1103  
City-St-Zip: EAST PALATKA, FL 32131 US

I hereby 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 all other like empowered.

SIGNATURE: KEITH DAVIS

VP

04/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date