

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90052 014 ***150.00

DOCUMENT # P05000001441

1. Entity Name

STEVEN F. DAVIS, C.P.A., P.A.



Principal Place of Business

4776 ~~NW~~ BROAD STREET
SUITE 100
ORLANDO FL 32814

New

Mailing Address

4776 ~~NW~~ BROAD STREET
SUITE 100
ORLANDO FL 32814

New



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

4776 NEW BROAD STREET
SUITE 100

Suite, Apt. #, etc.

4776 NEW BROAD ST, SUITE 100

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 90-0260154

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DAVIS, STEVEN F. *New*
4776 ~~NW~~ BROAD STREET
SUITE 100
ORLANDO FL 32814

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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
NAME
STREET ADDRESS
CITY - ST - ZIP
P
DAVIS, STEVEN F. *New*
4776 ~~NW~~ BROAD STREET #100
ORLANDO FL 32814 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
Davis, Steven F.
4776 New Broad Street, Suite 100
Orlando, FL 32814 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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CITY - ST - ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Steven F. Davis

Steven F. Davis

1-30-07 (407) 896-4931

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #