

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091594

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: M. M. DAVIS MANAGEMENT, INC.

## Current Principal Place of Business:

1000 NORTH UNITED STATES HIGHWAY ONE  
BAHAMA 102  
JUPITER, FL 33477 US

## New Principal Place of Business:

## Current Mailing Address:

1000 NORTH UNITED STATES HIGHWAY ONE  
BAHAMA 102  
JUPITER, FL 33477 US

## New Mailing Address:

FEI Number: 20-3065033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KEMPE, JOSEPH C  
941 NORTH HIGHWAY A1A  
JUPITER, FL 33477 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DAVIS, MIRIAM M  
Address: 1000 N. HIGHWAY ONE, BAHAMA 102  
City-St-Zip: JUPITER, FL 33477

Title: SD ( ) Delete  
Name: PASTER, SHARON D  
Address: 201 LAUREL GROVE AVENUE  
City-St-Zip: KENTFIELD, CA 94904

Title: VPSD ( ) Delete  
Name: SPORCK, DEBORAH  
Address: 187 LA MONTAGNE COURT  
City-St-Zip: LOS GATOS, CA 95032

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MIRIAM M. DAVIS

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date