

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122396

Entity Name: DAVIS-CHAPMAN, INC.

FILED
Mar 01, 2007
Secretary of State

Current Principal Place of Business:

13149 THOMASVILLE CIRCLE
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

3410 BERRY BLOSSOM LANE
PLANT CITY, FL 33567

Current Mailing Address:

13149 THOMASVILLE CIRCLE
TEMPLE TERRACE, FL 33617

New Mailing Address:

3410 BERRY BLOSSOM LANE
PLANT CITY, FL 33617

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: DP () Delete
Name: DAVIS-CHAPMAN, CARLA M
Address: 13149 THOMASVILLE CIRCLE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: DV () Delete
Name: CHAPMAN, KEITH L
Address: 13149 THOMASVILLE CIRCLE
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAVIS-CHAPMAN, CARLA M
Address: 3410 BERRY BLOSSOM LANE
City-St-Zip: PLANT CITY, FL 33567

Title: DV (X) Change () Addition
Name: CHAPMAN, KEITH L
Address: 3410 BERRY BLOSSOM LANE
City-St-Zip: PLANT CITY, FL 33567

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: CARLA M. DAVIS-CHAPMAN

DP

03/01/2007

Electronic Signature of Signing Officer or Director

Date