## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000130988

Entity Name: DAVYSON CORPORATION

FILED Jun 05, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9822 BERNWOOD PL DRIVE 9822 BERNWOOD PL DRIVE SUITE 101 SUITE 101 FORT MYERS, FL 33912 FORT MYERS, FL 33966

Current Mailing Address: New Mailing Address:

9822 BERNWOOD PL DRIVE 9822 BERNWOOD PL DRIVE SUITE 101 SUITE 101 FORT MYERS, FL 33912 FORT MYERS, FL 33966

FEI Number: 20-3528267 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION 1261 E SAMPLE ROAD POMPANO BEACH, FL 33064 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: DAVYSON JOHN LIBERIO, SOUTO
Address: 9822 BERNWOOD PL DRIVE #101
City-St-Zip: FORT MYERS EL 33966

City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33966

Title: () Delete Title: (X) Change ( ) Addition Name: MEDEIROS, JACKSON F Name: BRAGA, SAMUEL B 9822 BERNWOOD PL DRIVE #101 Address: 2346 WINKLER AVE Address: FORT MYERS, FL 33912 FORT MYERS, FL 33901 City-St-Zip: City-St-Zip:

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: DAVYSON SOUTO P 06/05/2006