2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 23, 2007 8:00 am DOCUMENT # P06000070508 **Secretary of State** 02-23-2007 90039 033 ***150.00 DAVIS BRIDGE CONSTRUCTION, INC. Principal Place of Business Mailing Address 1020 EAST JEFFERSON STREET 1020 EAST JEFFERSON STREET BROOKSVILLE FL 34601 **BROOKSVILLE FL 34601** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number 20-4940264 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent L'HARLES L. DAVIS PRESIDENTIAL SERVICES INCORPORATED Street Address (P.O. Box Number is Not Acceptable) AL PARKWAY 1020 E. JEFFERSON STREET CORAL FL 33904 City BROOKSVILLE, 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 . (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. П HILL Delete TITLE Addition 🔲 Change DAVIS, CHARLES NAME 1020 EAST JEFFERSON STREET STREET ADDRESS STREET ADDRESS BROOKSVILLE FL 34601 City St-ZIP CITY ST ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY SI-7IP CITY ST 7/P 1000 ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY ST ZIP THE Defete ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CHY-S1-7IP CITY SE-ZIP Defete ☐ Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CITY - ST ZIP mu ☐ Delete DHE ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST ZIP 12. Thereby certify that the information supplied with this filling 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 eath; 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

CHARLES L. DAVIS

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Karles L.

FILED