2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087057

Entity Name: DAVIS CLAIM MANAGEMENT, INC.

FILED Jan 09, 2008 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place of Business:		
	T 56 STREET FL 33012	US			
Current Mailing Address:			New Mailing Address:		
	T 56 STREET FL 33012	US			
FEI Number	: 26-0661237	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:		
	T 56 STREET	us			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (DAVIS, ROBEI 670 WEST 56 HIALEAH, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (DAVIS, LISA C 670 WEST 56 HIALEAH,, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROBERT M. DAVIS P 01/09/2008