

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000050236

Entity Name: DAVIS LOGISTICS, INC.

**FILED**  
**Feb 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

264 SW OLD NIBLACK AVENUE  
FT.WHITE, FL 32038

**New Principal Place of Business:**

**Current Mailing Address:**

264 SW OLD NIBLACK AVENUE  
FT.WHITE, FL 32038

**New Mailing Address:**

FEI Number: 36-4702736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BUSINESS FILINGS INCORORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DAVIS, WALTER T  
Address: 264 SW OLD NIBLACK AVENUE  
City-St-Zip: FT.WHITE, FL 32038

Title: VP  
Name: DAVIS, LAVERNE S  
Address: 264 SW OLD NIBLACK AVENUE  
City-St-Zip: FT.WHITE, FL 32038

I hereby 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 all other like empowered.

SIGNATURE: WALTER DAVIS

PRES

02/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date