

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000016112

1. Entity Name
JIM DAVIS ELECTRIC, INC.



Principal Place of Business
**104 SW 23RD ST.
OKEECHOBEE, FL 34974 US**

Mailing Address
**2205 SW 2ND AVE
OKEECHOBEE, FL 34974 US**

DO NOT WRITE IN THIS SPACE



02062006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0501886

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DAVIS, JIM
2205 SW 2ND AVE
OKEECHOBEE, FL 34974**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
DAVIS, PAM
2205 SW 2 ND AVE
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVTD
DAVIS, JIM
2205 SW 2ND AVE.
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000503855
04/26/06-80048-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

(863) 763 9473

SIGNATURE: *James K. Davis* **James K. Davis President. 4/8/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #