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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000053109 (2)

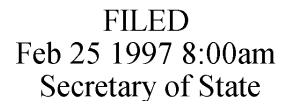
DARRELL DAVIS ENTERPRISES, INC.

Principal Place of Business

Darrell Davis Ent. Inc.

Mailing Address

2225 ALAQUA DRIVE





| 102 TECH DRIVE Sentord, FL 32771 | LONGWOOD FL 32779-3123 US | | **** | 3. Date Incorporated or Qualified 07/15/1994 | 3a. Date of Las | 6 |
|---|--|----------------------------------|-------------------|--|---------------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 102 TECH De | | | | 59-3256776 | | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional Required |
| City & State | City & State | | | 6. Election Campaign Financing | · · · · · · · · · · · · · · · · · · · | |
| 23 SAUFBRO | 28 | | | Trust Fund Contribution | | May Be |
| Zip Country | Zip | Country | | 8. This corporation has liability for in | | r s. 199.032, |
| 24 82771 25 SEMIL | | 30 | | | Yes 🔣 No | |
| | of Current Registered Agent | | M | 10. Name and Address of New Reg | istered Agent | |
| DAVID, DARRELL L | | 81 | Name D4 | AVIS, DARRELL L | | |
| 2225 ALAQUA DRIVE | | 62 | Street Addre | ess (P.O. Box Number is Not Acceptable | 6) | |
| LONGWOOD FL 32779 | | 83 | 22 | 25 ALAOUA DR | | |
| | | 63 | | | | |
| | | 84 | City | 0179094 | FL 85 2 | p Code 32779 |
| 11. Pursuant to the provisions of Section | s 607,0502 and 607,1508, Florida Statute | s, the above- | named corpo | oration submits this statement for the nu | rnose of changing | its registered |
| office or registered agent, or both, in agent. I am familiar with, and accept | the State of Florida. Such change was at the obligations of, Section 607.0505, Flor | uthorized by t rida Statutes. | he corporation | on's board of directors. I hereby accept | t the appointment | as registered |
| SIGNATURE | | | | | | |
| | registered agent and title if applicable (NOTE CERS AND DIRECTORS | Registered Agent | signature require | d when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE | ODC IN 12 |
| TITLE PO | DELETE | 1.1 TITLE | 1 65 | FCRETARY | Chang | |
| NAME DAVIS, DARRELL L | | 1.2 NAME | '' | CEETALY | L_ Ching | 0 23 (10011101) |
| STREET ADORESS 2225 ALAQUA DRIVE | | 1.3 STREET A | nnpree | | | 1 |
| CITY-S1-ZIP LONGWOOD FL | | 1.4 CiTY-SI- | - 1 | | | |
| TITLE D | ☐ DELETE | 2.1 TITLE | | REASURER, V. PRES. | Chang | e 🔀 Addition |
| NAME DAVIS, JACQUELINE | P | 2.2 NAME | | | | 1 |
| STREET ADORESS 2225 ALAQUA DRIVE | | 2.3 STREET A | DDRESS | | | |
| CITY-S1-ZIF LONGWOOD FL | | 2. 4 CITY~\$T | ZIP | bis) | t • | |
| TITLE | DELETE | 3 1 TITLE | | | Chang | e Addition |
| NAME | | 3.2 NAME | | | | |
| STREET ADDRESS | | 3.3 STREET A | DDRESS | | | |
| C(f.y. S1-Z)F | | 3.4. CITY-ST | ZIP | | | |
| TITLE | L DELETE | 4.1 TITLE | - 1 | | Chang | e 🔲 Addition |
| NAME. | | 4. 2 NAME | | | | · 1 |
| SIBEET ADORESS | | 4.3 STREET A | | | | |
| C(1)Y - S1 - ZIP | DELETE | 4.4 CITY - S1 - | ZIP | | III Chana | e [Addition |
| TITLE | L''I herete | 5.1 TITLE | | | Chang | C DOINOR D |
| NAME Crocket above or | | 5.2 NAME | 200100 | | | |
| STREET ALLORESS | | 5.3 STREET A | | | | |
| CHY-ST-ZIP TITLE | DELETE | 5.4 CITY-ST- 6.1 TITLE | LIF | | Chang | e Addition |
| NAME | | 6.2 NAME | | | La Vilding | - Submon |
| SIREET ADDRESS | | 6.3 STREET A | ODRESS | | | |
| CITY-S1-ZIP | | 6.4 CITY-ST- | - 1 | | | |
| | on supplied with this filing does not qualify | | | in Section 119.07(3)(i), Florida Statutes | . I further certify th | at the |

or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

OF FODARREDE L. SAVIS

401 333-2265