

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
3912 MCCLURE BLVD.
TALLAHASSEE, FLORIDA 32309-0001

**RECEIVED
AND
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DOCUMENT # P94000092944 (5)

To: Corporation Name

DAVIS ENTERTAINMENT, INC.

1995 MAY 19 9:07

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Office in Florida: **107 55 AVE E
BRADENTON FL 34203**
Mailing Address: **107 55 AVE E
BRADENTON FL 34203**

DO NOT WRITE IN THIS SPACE

3. Date this report was filed or required: 12/22/1994		3a. Date of Last Report	
4. FIC Number: 105-0340323		Appoint For: Next Appointment:	
5. Certificate of Status Desired: ☐		\$8.75 Additional Fee Required	
6. ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for information tax under § 199.02, Florida Statutes. ☒ Yes ☐ No			

2. Principal Office in Florida: 107 55 AVE E BRADENTON FL 34203		2a. Mailing Address: 107 55 AVE E BRADENTON FL 34203	
21. State Appointed:	26. State Appointed:		
22. City & State:	27. City & State:		
23. City & State:	28. City & State:		
24. City & State:	29. City & State:		
25. City & State:	30. City & State:		

9. Name and Address of Current Registered Agent: **DAVIS, LLOYD A
107 55 AVE E
BRADENTON FL 34203**

10. Name and Address of New Registered Agent	
81. Name:	
82. Does FIC No. or FIC Number is Not Applicable:	
83. City:	
84. City:	
85. Zip Code:	FL

11. Pursuant to the provisions of Sections 607.01(1) and 607.01(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(2), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS:		13. OFFICERS AND DIRECTORS:	
1. NAME: D DAVIS, LLOYD A 107 55 AVE E BRADENTON FL 34203		1. NAME:	☐ Change ☐ Addition
2. NAME: D DAVIS, ELAINE 107 55 AVE E BRADENTON FL 34203		2. NAME:	☐ Change ☐ Addition
3. NAME:		3. NAME:	☐ Change ☐ Addition
4. NAME:		4. NAME:	☐ Change ☐ Addition
5. NAME:		5. NAME:	☐ Change ☐ Addition
6. NAME:		6. NAME:	☐ Change ☐ Addition
7. NAME:		7. NAME:	☐ Change ☐ Addition
8. NAME:		8. NAME:	☐ Change ☐ Addition
9. NAME:		9. NAME:	☐ Change ☐ Addition
10. NAME:		10. NAME:	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(1)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and make me liable under the provisions of the law for the corporation or the officer or director responsible for this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing or on any other filing with this address.

SIGNATURE: *Lloyd A Davis* *Elaine Davis* **4-12-95** **399-8070**
SIGNATURE AND TYPED OR PRINTED NAME OF DIVISION OFFICER OR DIRECTOR