

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000043892

Entity Name: DAVIS MGT. INC.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

13460 SW 10 STREET  
SUITE 101  
PEMBROKE PINES, FL 33027 US

## Current Mailing Address:

13460 SW 10 STREET  
SUITE 101  
PEMBROKE PINES, FL 33027 US

## New Principal Place of Business:

4191 CYPRESS REACH COURT  
#403  
POMPANO BEACH, FL 33069 US

## New Mailing Address:

4191 CYPRESS REACH COURT  
#403  
POMPANO BEACH, FL 33069 US

FEI Number: 65-0583967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, CHARLES W  
4191 CYPRESS REACH COURT 403  
POMPANO BEACH, FL 33069 US

## Name and Address of New Registered Agent:

DAVIS, CHARLES W  
4191 CYPRESS REACH COURT  
#403  
POMPANO BEACH, FL 33069 US

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: CHARLES W. DAVIS

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: DAVIS, CHARLES W  
Address: 4191 CYPRESS COURT, 403  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP ( ) Delete  
Name: DAVIS, JULIE  
Address: 4191 CYPRESS REACH CT., 403  
City-St-Zip: POMPANO BEACH, FL 33069

Title: AST ( ) Delete  
Name: THOMPSON, LAURA  
Address: 4191 CYPRESS REACH CT., 403  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: DAVIS, CHARLES W  
Address: 4191 CYPRESS REACH COURT, 403  
City-St-Zip: POMPANO BEACH, FL 33069

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES W. DAVIS

PSD

04/21/2009

Electronic Signature of Signing Officer or Director

Date