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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075026 (1)

1. Corporation Name

J. DAVIDSON MANAGEMENT, INC.



Principal Place of Business

1733 S.W. 54TH LANE
CAPE CORAL FL 33914

Mailing Address

1733 S.W. 54TH LANE
CAPE CORAL FL 33914

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

DAVIDSON, JAMES
1733 S.W. 54TH LANE
CAPE CORAL FL 33914

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

James Davidson James Davidson

1-30-96

Date

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

DAVIDSON, JAMES
1733 S.W. 54TH LANE
CAPE CORAL FL 33914

☐ DELETE

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

DAVIDSON, MELISSA
1733 S.W. 54TH LANE
CAPE CORAL FL 33914

☐ DELETE

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ DELETE

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ DELETE

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ DELETE

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 registered agent or both, as provided for in the annual report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James Davidson James Davidson Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-96

941.540-2305

Date

Florida Phone #

CR2E034 (12/95)