

**FILED**  
**Apr 26, 2002 8:00 am**  
**Secretary of State**  
04-26-2002 90007 012 \*\*\*150.00

1. Entity Name  
**DAVID K. WATSON, INC.**

3548 HOOVER DR  
HOLIDAY FL 34691-3325

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HOLIDAY FL 34691-3325

Suite, Apt. #, etc.

Applied For
Not Applicable

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

Zip Code

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	

Daytime Phone # \_\_\_\_\_

0548978 AV

CR2E034 (9/01)