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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000042114 (4)

H & H DAVIS PROPERTY MANAGEMENT, INC.

Principal Place of Business 773 KILPATRICK AVE PT ST LUCIE FL 34983	Mailing Address 773 KILPATRICK AVE PT ST LUCIE FL 34983-159	52	3. Date Incorporated or Qualified 3a. Date of Last Report 05/16/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		65-0664795 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country 25	Zip 29	Country 30	This corporation has liability for intangible tax under s. 199.032, Florida Statutes
9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent
DAVIS, HENRY		81 Name	
773 KILPATRICK AVE PT ST LUCIE FL 34983		82 Street Add	dress (P.O. Box Number is Not Acceptable)
		B3	, , , , , , , , , , , , , , , , , , ,
		84 City	FI 85 Zip Code
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Statiagent I arri familiar with, and accept the oblig SIGNATURE Signature to prince or prince or accept degree of person prince or accept degree or prince or accept degree or prince or accept degree or prince or prince or accept degree or prince o	e of Florida. Such change was a gations of, Section 607.0505, Flo	tes, the above-named cor authorized by the corpora orida Statutes. (E. Reg stered Agent signature requ	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TILE D	DELETE	1.1 TITLE	Change Addition
NAME DAVIS, HENRY		1.2 NAME	
STREET ADDRESS 773 KILPATRICK AVE		1.3 STREET ADDRESS	
City-S1-7IP PT ST LUCIE FL 34983		1.4 CITY-ST-ZIP	
TILE D	DELETE	2.1 TITLE	Change Addition
NAME DAVIS, HARRILIS		2.2 NAME	
STREET ADDRESS 773 KILPATRICK AVE		2.3 STREET ADDRESS	
CITY-ST-ZIP PT ST LUCIE FL 34983		2. 4 C(TY - ST - Z(P	A
TIFLE	☐ DELETE	3.1 TITLE	Change
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CHY-S1-ZIP	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Addition
I THILE	ייין הכננוג	4.1 ITTLE 4.2 NAME	C orange C register
NAME CONTRACTORICS		4.3 STREET ADDRESS	
STREET ADDRESS		4.4 CITY-ST-ZIP	
CHY-ST-ZIF TOLE	☐ DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
City-St Zip		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	Change Addition
i NAME		6 2 NAME	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver or trustee empowered to execute this 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR