## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000023284

1. Corporation Name

WH DAVIS CONSTRUCTION INC

W.H. DA	VIS CONSTRUCTION, INC.	•					}					
Principal Place	e of Business	Ma	ailing Address		_		7	i indiindi iin iniii indii as	III) E <b>ü</b> eli <b>ü</b> ü		<b>28</b> 1411 <b>8</b> 1183	E 1811: 216: 1081
1911 E MALLORY ST 1911 E MALLORY ST												
PENSACOLA FL 32503 PENSACOLA FL 32503											D. 4.05	
							<u> </u>			IN THIS S	PACE	
								Date Incorporated or Qua	lifed			
								03/10/1997				
2. Principal P	lace of Business	2a.	. Mailing Address				1	FEI Number				pplied For
21		26					-:	<u>59-3437330                                 </u>				lot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5.	Certifcate of Status Desir	ed [	]	•	Additional Required
22		27										
City & Stat	e		City & State				- 1	Election Campaign Finan	cing [	]		May Be
23		28	<del></del> .				+-	Trust Fund Contribution				I to Fees
Zip	Country	<u> </u>	Zip	Cou	intry			This corporation owes the	current		ngible ∐Yes	⊠No
24	25	29		30	_			Personal Property Tax.	laus Baa			EINO
	9. Name and Address of Curre	ent Regis	stered Agent		81	Name	IV.	Name and Address of N	iew iced	istered A	Aeirr	
CHA	SE, JAMES L											
	E MALLORY ST				82	Street Addre	ess (P.	O. Box Number is Not Ac	ceptable	)		
	SACOLA FL 32503				83	,						
, 2,,,	5,100B1   E 52003											
					84	City		-		FL	85 Zip	Code
	to the provisions of Sections 607.05	502 and 6	607.1508, Florida Statu	tes, the a	bove	e-named corpo	oration	submits this statement it	ir tine pur	pose or c	nanging ii	registered
office or r agent. I a	registered agent, or both, in the Stati im familiar with, and accept the oblig	e of Florid	da. Such change was a	uthorized	tby tutes.	tne corporation	n s boa	ard of directors. I hereby	ассері іг	e appoin	itient as t	egistered
office or r	registered agent or both in the State	e of Florio gations of	da, Such change was a , Section 607.0505, Flo	uthorized orida Stati	utes.	the corporation	d when re	ard of directors. I nereby		DATE		
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CITY-ST-ZIP 14. I 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90220 038 \*\*\*150.00