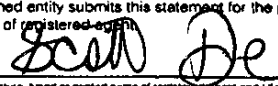
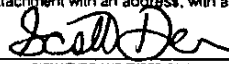


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006 8:00 am
Secretary of State

04-07-2006 90018 027 ***150.00

DOCUMENT # P97000039111			
1. Entity Name DAVIS & SCARBROUGH, INC.			
Principal Place of Business 1351 NW 22ND ST. POMPAHO BEACH, FL		Mailing Address 614 E HIGHWAY 50 BOX #201 CLERMONT, FL 34711	
2. Principal Place of Business 7068 NW 70th Manor		3. Mailing Address 7068 NW 70th Manor	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Parkland, FL		City & State Parkland, FL	
Zip 33067		Zip 33067	
Country		Country	
4. FEI Number 65-0754129		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCARBROUGH, VIRGIL D 10039 TWEEN WATERS STREET CLERMONT, FL 34715		7. Name and Address of New Registered Agent Scott DAVIS Street Address (P.O. Box Number is Not Acceptable) 7068 NW 70th Manor Parkland, FL 33067	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SCARBROUGH, VIRGIL 10039 TWEEN WATERS STREET CLERMONT, FL 34715 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST DAVIS, SCOTT 1351 NW 22ND ST. POMPAHO BEACH, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Davis Scott 7068 NW 70th Manor Parkland, FL 33067 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sec Davis Dawn 7068 N.W. 70th Manor Parkland, FL 33067 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date 3-23-06 Daytime Phone # 954-240-1641	

66016114



03162006 Chg-P CR2E034 (11/05)