

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000045459

FILED
Jul 06, 2009
Secretary of State

Entity Name: DAVIS INTERNATIONAL, INC.

Current Principal Place of Business:

35208 US 19 N
PLAM HARBOR, FL 34684

New Principal Place of Business:

3669 WEST WATERS AVE
TAMPA, FL 33614

Current Mailing Address:

1741 MAPLELEAF BLVD
OLDSMAR, FL 34677

New Mailing Address:

3669 WEST WATERS AVE
TAMPA, FL 33614

FEI Number: 59-3450762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, LUKE
35208 US 19 N
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

DAVIS, LUKE
3669 WEST WATERS AVE
TAMPA, FL 33614 US

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.

SIGNATURE: LUKE DAVIS

07/06/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVIS, LUKE E
Address: 1741 MAPLELEAF BLVD
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, LUKE E
Address: 3669 WEST WATERS AVE
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUKE DAVIS

PD

07/06/2009

Electronic Signature of Signing Officer or Director

Date