2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P97000092379

1. Entity Name DAVID G.S. TAYLOR, INC.



Principal Place of Business

7898 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781

Mailing Address

7898 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781

FILED Jan 21, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01132005 No Chg-P CR2E034 (10/03)

4. FEI Number			Applied For
59-3475689			Not Applicable
5. Certificate of Status Desired	П	\$8.75	Additional

Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, DAVID G 7998 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent,	urpose of changing its register	red office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it	applicable (NOTE: Register	ed Agent signature	a required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.		·	\$5.00 May Be Added to Fees		
10.	ÓFFICERS AND DIREC	TORS	T		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, DAVID G. S. 7893 SAILBOAT KEY #202 SO PASADENA, FL 33709			· · · · · · · · · · · · · · · · · · ·	U000 <u>0</u> 0189167
TITLE NAME STREET ADDRESS GITY-ST-ZIP					01724705-80085-001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN "	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				,	
NAME STREET ADDRESS CITY-ST-ZIP					
of the cor	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowers or on an attachment with an address, with all	l to execute this report as requ	emption state ature shall ha uired by Chap	id in Section 119.07(3) ve the same legal effector 607, Florida Statute	(i), Florida Statutes. I further certify that the information ct as if made under cath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if