### 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 # **P97000099900**1. Corporation Name

DAVIS SUPPLY, INC.

# **FILED** Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90032 012 \*\*\*150.00



						_{			<b>8</b> 8(1) <b>40</b> () 1884
Principal Place of Business Mailing Address									
6642 U.S. HIGHWAY 19 6642 U.S. HIGHWAY 19									
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34			4652			DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualifed			
						11/21/1997			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		I Ap	plied For
			T V T	a TNC		59-3482276		No	t Applicable
21 DAVIS SUPPLY, INC. 26 DAVIS SUPPLY Suite, Apt. #, etc. Suite, Apt. #, etc.				, INU.				\$8.75	
22 6624 U.S. HIGHWAY 19 27 P. O. BOX 15				528		5. Certifcate of Status Desired		Fee Re	
City & State		City & State				6. Election Campaign Financing		<del>-</del> \$5:00	May Be
	ORT RICHEY, FL	<b>⊢</b> ′	28 NEW PORT RICHEY, FL			Trust Fund Contribution		Added t	
Zip	Country	Zip		intry		8. This corporation owes the curre	nt year Inta	ıngible	
34652		29 34656	30			Personal Property Tax.	•	∐Yes	□No
34032	9. Name and Address of Curre	9 1000	15-1	T		10. Name and Address of New Re	gistered /	agent	·
				81	Name	JAMES H. DAVIS			
DAVIS, JAMES H									
6642 U.S. HIGHWAY 19				82	Sueet Addre				
NEW PORT RICHEY FL 34652				83		6624 U.S. HICHWAY 19			
									2 - 4 -
				84	City	NEW PORT RICHEY	FI	85 Zip (	652
41 Pursuant	to the provisions of Sections 607 05	02 and 607 1508. Florida Statu	ites, the a	bove	-named corpr	oration cubmits this statement for the n	urpose of a	changing its	registered
office or t	egistered agent, or both, in the State	of Florida, Such change was	authorized	ו עם נ	the corporatio	on's board of directors. I hereby accept	the appoin	tment as re	gistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Fi	ionua Stati	utes.					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NO)	F: Registered	Acent	t signature required	d when reinstating)	DATE		<del></del>
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	RS IN 12
TITLE	Р	DELETE						☐ Change	Addition
NAME	DAVIS, JAMES H			1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	NEW PORT RICHEY FL 34652			TY-ST	r-zip				
TITLE	V DELETE			2.1 TITLE				☐ Change	Addition
NAME	DAVIS. CLARA E			2.2 NAME					
STREET ADDRESS	6828 RIVER ROAD				ADDRESS				
	NEW PORT RICHEY FL 34652								
CITY-ST-ZIP	ST DELETE			2.4 CITY-ST-ZIP 3.1 TITLE		-	14,	Change	Addition
TITLE	DAVIS, MELISSA A			3.2 NAME				_ •	
NAME	ANALE PERVEYEY COLLARS DON'S			3.3 STREET ADDRESS					
STREET ADDRESS	TAMPA FL 32626			l i					
CITY-ST-ZIP	V DELETE			3.4 CITY-ST-Z#P 4.1 TITLE				Change	Addition
TITLE	DAVIS, MATTHEW P	/_ percie	4.1 II		ł				_
NAME	TOTAL FOTAL AND		- 1		ADDRESS				
STREET ADDRESS	NEW DODE DIGHTLY ST AME	<b>1</b>							
CITY-ST-ZIP	NEW PORT RICHEY FL 34653	DELETE	4.4 CI 5.1 TI	TY-ST	-CIP	<u> </u>		Change	Addition
TITLE		□ N¢reie	5.1 N						
NAME					ADDRESS				
STREET ADDRESS				ITY-ST					
CITY-ST-ZIP		□ nci ete	5.4 CI		-217			Change	Addition
TITLE		☐ DELETE	6.2 N/						
NAME					ADOBECO				ļ
STREET ADDRESS					ADDRESS				
CITY OF TIP	1		6.4 C	TY-ST	í-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 chapter, on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

ICER OR DIRECTOR

JAN. 6, 1999

(727) 849-5947