

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

FILED
Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90011 021 ***150.00

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P 98000018910
1. Corporation Name
CHARLES S. DAVIDSON & ASSOCIATES
INC.

Principal Place of Business Mailing Address
7385 NW 52nd COURT
LAUDER HILL FL 33319-6341

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
1	26	2/26/98	6508 27646	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
2	27	<input type="checkbox"/>		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
3	28	<input type="checkbox"/>		
Zip Country	Zip Country	8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4	29	30		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JEFFREY MARTIN HERMAN 1601 N. FLAMINGO ROAD SUITE 2 PEMBROKE PINES FL 33028	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. PRES. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
HELENE H. DAVIDSON 7385 NW 52 nd COURT LAUDERHILL FL 33319-6341 VICE PRESIDENT SEC. CHARLES S. DAVIDSON 7385 NW 52 nd COURT LAUDERHILL FL 33319	<input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition

4. 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.

SIGNATURE: HELENE H. DAVIDSON 954 742-4147
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

P98000018910
587243-90011-21

**CHARLES S. DAVIDSON
& ASSOCIATES, INC.**

Manufacturers Representative

7385 N.W. 52nd Court • Lauderhill, Florida 33319
(954) 742-4147 • Fax (954) 742-4147 • 1-800-375-9224

MEMO

TO KATHERINE HARRIS

SUBJECT ANNUAL REPORT

DATE 7/5/99

ENCLOSED PLEASE FIND A CHECK IN THE AMOUNT OF \$150.00.

THIS IS OUR FIRST FILING AND NEVER RECEIVED ANY NOTICE THAT SUCH A FILING WAS REQUIRED.

I CALLED YOUR OFFICE & WAS TOLD TO SEND THE \$150.00 CHECK ALONG WITH THIS EXPLANATION THAT WE NEVER ^{SIGNED} RECEIVED ANY NOTICE THAT SUCH

REPLY A FILING WAS REQUIRED.

IF WE HAD, WE WOULD HAVE SENT THE REQUIRED AMOUNT IMMEDIATELY SINCE WE ARE A SMALL COMPANY AND WILL STAY IN BUSINESS. NOW THAT WE KNOW OF SUCH A FEE IF WE DONT

DATE _____ SIGNED _____

RETAIN WHITE COPY FOR OUR FILE. SEND YELLOW, PINK COPY TO CUSTOMER.

NO REPLY NECESSARY PLEASE REPLY TELEPHONE RETURN ENCLOSED MEMO WITH REPLY

RECEIVE A NOTICE NEXT YEAR WE WILL KNOW ENOUGH TO CALL & ASK FOR ONE AS WE DID ON THE DAY WE RECEIVED YOUR 2ND NOTICE.
THANK YOU