

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063074

Entity Name: THE DAVIDSON GROUP, INC

FILED
Feb 28, 2004
Secretary of State

Current Principal Place of Business:

690 OSCEOLA AVENUE
SUITE 202
WINTER PARK, FL 32789

Current Mailing Address:

690 OSCEOLA AVENUE
SUITE 202
WINTER PARK, FL 32789

New Principal Place of Business:

690 OSCEOLA AVENUE
SUITE 302
WINTER PARK, FL 32789

New Mailing Address:

690 OSCEOLA AVENUE
SUITE 302
WINTER PARK, FL 32789

FEI Number: 59-3587485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDWARDS, AVALON L
690 OSCEOLA AVENUE
SUITE 302
WINTER PARK, FL 32789

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDWARDS, AVALON L
Address: 690 OSCEOLA AVE STE 302
City-St-Zip: WINTER PARK, FL 32789

Title: CB () Delete
Name: DAVIDSON, ROY
Address: 690 OSCEOLA AVE STE 202
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CB (X) Change () Addition
Name: DAVIDSON, ROY
Address: 690 OSCEOLA AVE STE 302
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AVALON L EDWARDS

P

02/28/2004

Electronic Signature of Signing Officer or Director

Date