

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000095724

FILED  
Apr 17, 2003  
Secretary of State

Entity Name: 5 DAVIS GROUP, INC.

**Current Principal Place of Business:**

529 E. 9TH STREET  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

1751 GLADIOLAS DRIVE  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 59-3611708

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WASHINGTON, GLORIA D  
1751 GLADIOLAS DR.  
WINTER PARK, FL 32792 US

**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: JONES, MYRTLE L  
Address: 801 N CENTER AVE  
City-St-Zip: PANAMA CITY, FL 32401

Title: VP ( ) Delete  
Name: DAVIS, BILLY JOSEPH  
Address: 1403 DUNNAT RD  
City-St-Zip: LYNN HAVEN, FL 32444

Title: T ( ) Delete  
Name: WASHINGTON, GLORIA D  
Address: 1751 GLADIOLAS DR  
City-St-Zip: WINTER PARK, FL 32792

Title: S ( ) Delete  
Name: DAVIS, BETTIE ANN  
Address: 309 RIPPLING STREAM RD  
City-St-Zip: DURHAM, NC 27704

Title: A ( ) Delete  
Name: DAVIS, JAMES E  
Address: 16014 AMBERLY DR  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: GLORIA D WASHINGTON

T

04/17/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date