

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S47418

FILED  
Mar 15, 2009  
Secretary of State

Entity Name: DAVIS & ASSOCIATES CONSULTING, INC.

**Current Principal Place of Business:**

2225 E EDGEWOOD DR  
STE 3  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5312  
LAKELAND, FL 338075312

**New Mailing Address:**

FEI Number: 59-3064464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRISON, JOSEPH A.  
3500 S FLORIDA AVE  
3  
LAKELAND, FL 33803 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: D ( ) Delete  
Name: DAVIS, RICHARD L.,  
Address: 1109 HALLAMWOOD CT  
City-St-Zip: LAKELAND, FL

Title: S ( ) Delete  
Name: DAVIS, CHARLOTTE  
Address: 1109 HALLAMWOOD CT  
City-St-Zip: LAKELAND, FL

Title: VP ( ) Delete  
Name: DAVIS, RICHARD L III  
Address: 1609 DEBUT LANE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP ( ) Delete  
Name: DAVIS, CHRISTOPHER A  
Address: 1984 VARICK WAY  
City-St-Zip: CASSELBERRY, FL 32707

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLOTTE O. DAVIS

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03/15/2009

Electronic Signature of Signing Officer or Director

Date