

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 22 PM 4:18

DOCUMENT # V05565 (9)

1. Corporation Name

JIM DAVIS COMMUNICATIONS, INC.

Principal Place of Business

10553 LAKE MONTEREY DR.
#202
ORLANDO FL 32821

Mailing Address

10553 LAKE MONTEREY DR.
103
ORLANDO FL 32821
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/10/1992

3a. Date of Last Report
04/18/1994

4. FEI Number
59-3101257

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

21 3941 CLARENDON OCEAN RD.

2a. Mailing Address

26 10553 LAKE MONTEREY DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

#103, attn: Shelby Davis

City & State

23 Orlando Florida

City & State

28 Orlando, Florida

Zip

24 32810

Country

25 USA

Zip

29 32821

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEINBERG, CHARLES L.
KEY CENTER SOUTH
2869 S DELANEY AVE.
ORLANDO FL 32806

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 fee if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PST
NAME	DAVIS, SHELBY J.
STREET ADDRESS	10553 LAKE MONTEREY DR.
CITY - ST - ZIP	ORLANDO FL
TITLE	D
NAME	DAVIS, SHELBY J.
STREET ADDRESS	10553 LAKE MONTEREY DR.
CITY - ST - ZIP	ORLANDO FL
TITLE	V
NAME	DAVIS, BRETT
STREET ADDRESS	10553 LAKE MONTEREY DR.
CITY - ST - ZIP	ORLANDO FL
TITLE	M
NAME	DAVIS, JIM C.
STREET ADDRESS	10553 LAKE MONTEREY DR. #103
CITY - ST - ZIP	Orlando, Florida 32821
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Shelby J. Davis SHELBY J. DAVIS PST

3/17/95

407-352-2092

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Typed Phone #