

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000026078

**Entity Name:** DATAVISION, INC.**Current Principal Place of Business:**4905 34TH STREET S, SUITE 142  
ST. PETERSBURG, FL 33711**Current Mailing Address:**4905 34TH STREET S, SUITE 142  
ST. PETERSBURG, FL 33711 US**FEI Number:** 82-0547218**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STAACK, SIMMS & REIGHARD, PLLC  
900 DREW STREET, SUITE 1  
CLEARWATER, FL 33755 US*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**Officer/Director Detail :**

Title COO  
Name ABOLOFIA, MARK  
Address 4905 34TH STREET S, SUITE 142  
City-State-Zip: ST. PETERSBURG FL 33711

Title PRESIDENT  
Name MCKEEVER, KATHY  
Address 4905 34TH STREET S, SUITE 142  
City-State-Zip: ST. PETERSBURG FL 33711

Title OFFICER  
Name SHERIDAN, KEVIN  
Address 4905 34TH STREET S, SUITE 142  
City-State-Zip: ST. PETERSBURG FL 33711

Title DIRECTOR  
Name MCKEEVER, MICHAEL J  
Address 4905 34TH STREET S, SUITE 142  
City-State-Zip: ST. PETERSBURG FL 33711

Title CHAIRMAN  
Name PERONE, KATHY  
Address 4905 34TH STREET S, SUITE 142  
City-State-Zip: ST. PETERSBURG FL 33711

*I hereby 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 all other like empowered.*

**SIGNATURE:** KATHY MCKEEVER**DIRECTOR****05/18/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date