

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000009401

Entity Name: THOMAS-DAVIS, INC.**Current Principal Place of Business:**610 CLEMATIS STREET, #CU-5
WEST PALM BEACH, FL 33401**Current Mailing Address:**610 CLEMATIS STREET, #CU-5
WEST PALM BEACH, FL 33401 US**FEI Number:** 65-0816122**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THOMAS, SUSAN S
610 CLEMATIS STREET, #CU-5
WEST PALM BEACH, FL 33401 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	P
Name	THOMAS, SUSAN
Address	610 CLEMATIS STREET, #CU-5
City-State-Zip:	WEST PALM BEACH FL 33401

Title	VP
Name	THOMAS, NORMAN
Address	610 CLEMATIS STREET, #CU-5
City-State-Zip:	WEST PALM BEACH FL 33401

Title	T
Name	THOMAS, SUSAN
Address	610 CLEMATIS STREET, #CU-5
City-State-Zip:	WEST PALM BEACH FL 33401

Title	S
Name	THOMAS, NORMAN
Address	610 CLEMATIS STREET, #CU-5
City-State-Zip:	WEST PALM BEACH FL 33401

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: SUSAN THOMAS**REGISTERED AGENT****01/21/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date