

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000044907 (0)

1. Corporation Name

ROBERTSON & WEBB, INC.
Robertson & Webb Inc.



Principal Place of Business

Mailing Address

~~3109 W FIELDER ST~~ *2105 Cool Springs Rd*
TAMPA FL 33611 *#m-4*
Tampa Fl 33604

3. Date Incorporated or Qualified 06/02/1995	3a. Date of Last Report
4. FEI Number 59-3303805	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business Suite Apt. #, etc	22. City & State	23. Zip	24. Country	25. Country	26. Mailing Address Suite, Apt. #, etc	27. City & State	28. Zip	29. Country	30. Country
					<i>2105 Cool Springs Rd</i>	<i>Tampa Fl</i>	<i>33604</i>		<i>Hillsborough</i>

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBERTSON, CHERYL
3109 W FIELDER ST
TAMPA FL 33611

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83. City	84. State	85. Zip Code
	<i>2105 Cool Springs Rd</i>	<i>#m4</i>	<i>Tampa</i>	<i>FL 33604</i>

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 the registered agent, officer or director

(Valid for 30 days. Age of signature expires after 30 days)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D ROBERTSON, CHERYL 3109 W FIELDER ST TAMPA FL 33611	1. TITLE	O <i>Robertson, Cheryl</i> <i>2105 Cool Springs Rd #m4</i> <i>Tampa Fl 33604</i>
TITLE	D	2. NAME	
STREET ADDRESS	WEBB, SHERIL 6540 87TH AVE N PINELLAS PARK FL 34666	3. STREET ADDRESS	
CITY - ST - ZIP	PINELLAS PARK FL 34666	4. CITY - ST - ZIP	
CITY - ST - ZIP		5. CITY - ST - ZIP	
CITY - ST - ZIP		6. CITY - ST - ZIP	
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CITY - ST - ZIP		12. CITY - ST - ZIP	
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CITY - ST - ZIP		14. CITY - ST - ZIP	
CITY - ST - ZIP		15. CITY - ST - ZIP	
CITY - ST - ZIP		16. CITY - ST - ZIP	
CITY - ST - ZIP		17. CITY - ST - ZIP	
CITY - ST - ZIP		18. CITY - ST - ZIP	
CITY - ST - ZIP		19. CITY - ST - ZIP	
CITY - ST - ZIP		20. 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)(b), 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:

Cheryl Robertson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/96 (813) 932-0397

DATE (Date of Filing)

CR2E034 (12/95)