## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000092516

Address:

City-St-Zip:

16091 NW US 441

ALACHUA, FL 32615

Entity Name: BOB'S CITGO, INCORPORATED

FILED Jul 03, 2008 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	/ US HWY 44 <sup>.</sup> A, FL 32615	1			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	/ US HWY 44 <sup>.</sup> A, FL 32615	1			
FEI Number	: 59-3542793	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
16091 NW	, ROBERT P / US HWY 44 A, FL 32615	1 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( MILLIKEN, RO 16091 NW US ALACHUA, FL	441	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP ( MILLIKEN. GAI	) Delete IL	Title: Name:	( ) Change ( ) Addition	

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: ROBERT MILLIKEN P 07/03/2008