

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 297244**

1. Entity Name  
**WEBB ELECTRIC COMPANY OF FLORIDA, INC.**



Principal Place of Business  
**3194 W. NINE MILE RD.  
P.O. DRAWER 17629  
PENSACOLA, FL 32522**

Mailing Address  
**3194 W. NINE MILE RD.  
P.O. DRAWER 17629  
PENSACOLA, FL 32522**



02012006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1143230**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WEBB, JERRY T  
3194 W. NINE MILE ROAD  
PENSACOLA, FL 32504**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	SD
NAME	WEBB, BETTIE T
STREET ADDRESS	2782 CREEKWOOD
CITY-ST-ZIP	CANTONMENT, FL
TITLE	VPTD
NAME	WEBB-SCHWARTZ, MELINDA
STREET ADDRESS	411 BECKS LAKE RD
CITY-ST-ZIP	CANTONMENT, FL
TITLE	PD
NAME	WEBB, JERRY T
STREET ADDRESS	2782 CREEKWOOD
CITY-ST-ZIP	CANTONMENT, FL
TITLE	VPD
NAME	WEBB, DANIEL A
STREET ADDRESS	201 TARA RD
CITY-ST-ZIP	CANTONMENT, FL 08000
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000434894  
02/25/06-80020-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

*Melinda Webb Schwartz*

02-13-06