

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # 382424

1. Entity Name
4-B, INC.



Principal Place of Business

**208 S.W. 2ND AVENUE
OKEECHOBEE, FL 34974 US**

Mailing Address

**208 S.W. 2ND AVENUE
OKEECHOBEE, FL 34974 US**



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2166969

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BOBBITT, EDWARD H
208 S.W. 2ND AVENUE
OKEECHOBEE, FL 34974**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BOBBIT, EDWARD H
STREET ADDRESS 208 S.W. 2ND AVE
CITY-ST-ZIP OKEECHOBEE, FL 34974

TITLE ST
NAME TEWKSBURY, LINDA
STREET ADDRESS 208 S.W. 2ND AVE
CITY-ST-ZIP OKEECHOBEE, FL 34974

TITLE VP
NAME BOBBITT, NANCY
STREET ADDRESS 208 S.W. 2ND AVE
CITY-ST-ZIP OKEECHOBEE, FL 34974

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000777773
01/10/08-80022-010 150.00

**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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward Bobbitt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-8-08 863-763-2108