

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90017 004 ***150.00

DOCUMENT # 400039

1. Entity Name
RICHBURG & SONS, INC.



Principal Place of Business
**2250 B HIGHWAY 98
MARY ESTHER, FL 32569 US**

Mailing Address
**615 LLOYD STREET
FORT WALTON BEACH, FL 32547 US**



04092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1437548

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RICHBURG, CHARLES B
443 SANDY RIDGE CIR.
MARY ESTHER, FL 32569**

**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 PD
NAME RICHBURG, PETE
STREET ADDRESS 615 LLOYD STREET
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE SD
NAME RICHBURG, PATRICIA L
STREET ADDRESS 615 LLOYD STREET
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE V
NAME RICHBURG, CHARLES B.
STREET ADDRESS 443 SANDY RIDGE CIRCLE
CITY-ST-ZIP MARY ESTHER, FL

TITLE T
NAME RICHBURG, PETER J
STREET ADDRESS 457 SANDY RIDGE CIRCLE
CITY-ST-ZIP MARY ESTHER, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Patricia Richburg **PATRICIA RICHBURG** **SD** **4/14/08** **(850) 581-5600**
Secretary