

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 466942

FILED
Feb 05, 2009
Secretary of State

Entity Name: T. C. AND RUTH B. GIBSON, INC.

Current Principal Place of Business:

110 E. YORK ST.
P.O. BOX 535
MONTICELLO, FL 32345 US

New Principal Place of Business:

110 E. YORK ST.
MONTICELLO, FL 32344 US

Current Mailing Address:

110 E. YORK ST.
P.O. BOX 535
MONTICELLO, FL 32345 US

New Mailing Address:

1282 TIMBERLANE RD
SUITE G,H,I
TALLAHASSEE, FL 32312

FEI Number: 59-1729307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAFFORD, SARAH RUTH
110 E. YORK STREET
MONTICELLO, FL 32345 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PAFFORD, SARAH RUTH,
Address: 110 E. YORK STREET
City-St-Zip: MONTICELLO, FL 32345

Title: VDS () Delete
Name: PAFFORD, JAMES M. SR.,
Address: 110 E. YORK STREET
City-St-Zip: MONTICELLO, FL 32345

Title: SDA () Delete
Name: MAY, ASHLEY P.,
Address: 1103 LIVE OAK PLANTATION RD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: SARAH RUTH PAFFORD

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date