

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 593319

Entity Name: PRINTER'S PRIDE, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

D/B/A BOB'S BUSY BEE PRINTING
7211 N. DALE MABRY HIGHWAY #104
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

D/B/A BOB'S BUSY BEE PRINTING
7211 N. DALE MABRY HIGHWAY #104
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-1860006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALSH, VINCENT E CPA
3302 AZEELE ST
TAMPA, FL 33609 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: S () Delete
Name: SEILER, ROBERT G,
Address: 4980 KILKENNEY WAY
City-St-Zip: OLDSMAR, FL 34677

Title: PD () Delete
Name: WEXLER, BETH S
Address: 2782 SADDLEWOOD LANE
City-St-Zip: PALM HARBOR, FL 34685

Title: VP () Delete
Name: WEXLER, BRADLEY A
Address: 2782 SADDLEWOOD LANE
City-St-Zip: PALM HARBOR, FL 34685

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: BETH S. WEXLER

PD

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date