

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 612385 1. Entity Name BOB LEDBETTER SALES, INC.	
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Principal Place of Business 913 IRIS DRIVE DELRAY BCH, FL 33483	Mailing Address 913 IRIS DRIVE DELRAY BCH, FL 33483
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01082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1891215	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LEDBETTER, ROBERT 913 IRIS DRIVE DELRAY BCH, FL 33483
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**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 _____

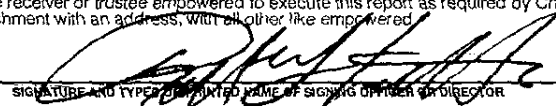
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEDBETTER, SILVIA 913 IRIS DR DELRAY BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LEDBETTER, ROBERT G 913 IRIS DR DELRAY BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/17/06-80023-004 158.75

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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:  **1/8/2006** **561-272-776**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #