

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 21, 2009
Secretary of State**

DOCUMENT# 635824

Entity Name: GOBER ENTERPRISES, INC.

Current Principal Place of Business:

7501 PHILLIPS HWY
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7501 PHILLIPS HWY
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-1930081 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOBER, ROGER
122 OCEAN WALK DR SOUTH
ATLANTIC BEACH, FL 32233 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOBER, ROGER
Address: 122 OCEAN WALK DR SOUTH
City-St-Zip: ATLANTIC BEACH, FL 33233

Title: V () Delete
Name: NEWCOMBE, KEITH
Address: 348 SOPHIA TERRACE
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: T () Delete
Name: WALKER, ROBERT
Address: 8844 ST. LUCIA COURT
City-St-Zip: JACKSONVILLE, FL 32216

Title: S (X) Delete
Name: HENDERSON, SUSAN T
Address: 395 SATURIBA DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

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:

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: ROBERT WALKER

TREA

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date