## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004544

Entity Name: IT'S BOB'S TRUCKN, INC.

FILED Aug 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2823 EAST MICHIGAN STREET 7001 142ND AVENUE N. ORLANDO, FL 32806

LOT# 49

LARGO, FL 33771

**Current Mailing Address: New Mailing Address:** 

2823 EAST MICHIGAN STREET 7001 142ND AVENUE N. ORLANDO, FL 32806 LOT# 49

LARGO, FL 33771

FEI Number: 38-3722185 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, ROBERT B 2823 EÁST MICHIGAN STREET ORLANDO, FL 32806

JONES, ROBERT B 7001 142ND AVE.N. LOT# 49 LARGO, FL 33771 US

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: 08/27/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDPS ( ) Delete Title: CDPS (X) Change ( ) Addition

JONES, ROBERT B JONES, ROBERT B Name: Name: 2823 EAST MICHIGAN STREET Address: 7001 142ND AVE.N. Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: LARGO, FL 33771

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 B.JONES **PRES** 08/27/2008

Electronic Signature of Signing Officer or Director

Date