

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F42727

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: WEBB'S TRANSMISSION, INC.

## Current Principal Place of Business:

307 RACETRACK ROAD NW  
307 RACETRACK RD NW  
FT. WALTON BEACH, FL 32547

## New Principal Place of Business:

## Current Mailing Address:

307 RACETRACK ROAD NW  
307 RACETRACK RD NW  
FT. WALTON BEACH, FL 32547

## New Mailing Address:

FEI Number: 59-2117800      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEBB, JOSEPH H  
307 RACETRACK RD NW  
FORT WALTON BEACH, FL 32547      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: PD ( ) Delete  
Name: WEBB, JOSEPH H,  
Address: 123 BEACH DR  
City-St-Zip: FT WALTON BEACH FL,

Title: STD ( ) Delete  
Name: WEBB, JOAN M,  
Address: 123 BEACH DR  
City-St-Zip: FT WALTON BEACH FL,

Title: VPD ( ) Delete  
Name: WEBB, J. B  
Address: 213 COSTAKI CT NW  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: STD ( ) Delete  
Name: WEBB, NICOLE C  
Address: 213 COSTAKI CT NW  
City-St-Zip: FORT WALTON BEACH, FL 32548

## 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: NICOLE WEBB

STD

01/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date