

FILED
Apr 29, 2008 08:00 AM
Secretary of State

1. Entity Name
R. WEBB, INC.



Mailing Address
1181 NW 152 CT
WILLISTON, FL 32696 US

DO NOT WRITE IN THIS SPACE



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2191862

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WEBB RICHARD C.
1181 NW 152 CT
WILLISTON, FL 32696

**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, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be
Added to Fees

10.	OFFICERS AND DIRECTORS
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TITLE	PD
NAME	WEBB, RICHARD C
STREET ADDRESS	1181 NE 152 CT
CITY - ST - ZIP	WILLISTON, FL

TITLE	VD
NAME	WEBB, CHARLES M.,JR.
STREET ADDRESS	6051 NE STATE RD 121
CITY - ST - ZIP	WILLISTON, FL

TITLE	STD
NAME	WEBB, CHARLES M.,SR.
STREET ADDRESS	1195 NE 152 CT
CITY - ST - ZIP	WILLISTON, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U0000093136U
05/22/08-80011-022 150.00

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/08

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Daytime Pricing: