## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G53761

FILED Jul 08, 2008 Secretary of State

Entity Name: ANN TEAGUE BONDING AGENCY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2 EAST	TEAGUE FORSYTH ST IVILLE, FL 322			
urrent Mailing Address:		New Mailing Address:		
2 EAST	TEAGUE FORSYTH ST WILLE, FL 322			
l Number	: 59-2307471	FEI Number Applied For ( )	FEI Number Not Applicable	e( ) Certificate of Status Desired ( )
ame and	Address of C	Current Registered Agent:	Name and Add	ress of New Registered Agent:
EAGUE, 12 EAST	FORSYTH ST	REET		
CKSON ne above	IVILLE, FL 322 named entity		purpose of changing its reg	gistered office or registered agent, or both,
ACKSON ne above the State	IVILLE, FL 322 named entity: e of Florida.		purpose of changing its reç	gistered office or registered agent, or both,
ACKSON ne above the State	IVILLE, FL 322 named entity e of Florida. RE:			gistered office or registered agent, or both,  Date
ACKSON  ne above the State GNATUI  accordan	e named entity of a property of the state of Florida.  RE:  Electronice with s. 607.19	submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n	ent	
ne above the State GNATUI accordan ection Cal	e named entity of a property of the state of Florida.  RE:  Electronice with s. 607.19	submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ent ot receive the prior notice.	
ACKSON  ne above the State GNATUI  accordan  ection Cai	e named entity e of Florida.  RE: Electror Ice with s. 607.19 Impaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did ng Trust Fund Contribution ( ). TORS: Delete ARD W., DR	ent ot receive the prior notice.	Date
accordantection Caretion Caret	e named entity e of Florida.  RE:  Electror  Ge with s. 607.19  mpaign Financin  S AND DIREC  PD ( TEAGUE, RICH 6964 LA LOMA JACKSONVILL	submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did ng Trust Fund Contribution ( ).  TORS:  Delete ARD W., DR E, FL  Delete J., DR	ent ot receive the prior notice.  ADDITIONS/CH  Title:  Name:  Address:	Date HANGES TO OFFICERS AND DIRECTOR

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: JOANN MAHLE VP 07/08/2008