

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22140

FILED  
Mar 06, 2008  
Secretary of State

Entity Name: ROBERTS ENTERPRISES, INC.

## Current Principal Place of Business:

1900 NE 25TH AVE  
OCALA, FL 34474 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 100  
SILVER SPRINGS, FL 34489 US

## New Mailing Address:

FEI Number: 59-2721263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HICKS, DANIEL  
421 S. PINE AVE  
OCALA, FL 34474 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: C ( ) Delete  
Name: ROBERTS, WILLIAM H JR  
Address: P.O. BOX 142 N/A  
City-St-Zip: SILVER SPRINGS, FL 34489

Title: S ( ) Delete  
Name: ROBERTS, NANCY  
Address: P.O. BOX 142 N/A  
City-St-Zip: SILVER SPRINGS, FL 34489

Title: P ( ) Delete  
Name: ROBERTS, BENJAMIN  
Address: 4460 SW 20TH AVE  
City-St-Zip: OCALA, FL 34474

Title: 1V ( ) Delete  
Name: ROBERTS, WILLIAM H III  
Address: 4580 S E 36TH AVE  
City-St-Zip: OCALA, FL 34480

## 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: BENJAMIN W ROBERTS

P

03/06/2008

Electronic Signature of Signing Officer or Director

Date