


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 8:00 am
Secretary of State

02-01-2008 90015 007 ***150.00

DOCUMENT # J72765

1. Entity Name
T & P ENTERPRISES OF BAY COUNTY, INC.



Principal Place of Business 20016 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413	Mailing Address 20016 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413
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DO NOT WRITE IN THIS SPACE



01302008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2854062	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GARBUTT, EDGAR
 20016 FRONT BEACH ROAD
 PANAMA CITY BCH., FL 32413**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

**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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARBUTT, EDGAR W 136 DOWNING CT. PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GARBUTT, PATRICIA A 136 DOWNING CT PANAMA CITY BEACH, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAAS, DAVID E 3109 FRANKFORD AVE. PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAAS, JOHN W 401 SAVANNAH PARKWAY PANAMA CITY BEACH, FL 32407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZASLAVSKY, CHRISTINE 107 15TH ST. PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE 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 another like empowereed.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____