

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36431

Entity Name: MHB, INC.

FILED
Apr 09, 2006
Secretary of State

Current Principal Place of Business:

1750 UNIVERSITY BLVD. N.
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

1750 UNIVERSITY BLVD. N.
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-2913510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEVIS, MURWIN H
1750 UNIVERSITY BLVD. W.
JAX, FL 32211 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: PSD () Delete
Name: BEVIS, MURWIN H.,
Address: 1750 UNIVERSITY BLVD NORTH
City-St-Zip: JACKSONVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BEVIS, MURWIN H PSD
Address: 1750 UNIVERSITY BLVD NORTH
City-St-Zip: JACKSONVILLE, FL 32211 US

Title: VPT () Change (X) Addition
Name: LATHAM-BEVIS, ELIZABETH C VPT
Address: 1750 UNIVERSITY BLVD N
City-St-Zip: JACKSONVILLE, FL 32211 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MURWIN H BEVIS

PSD

04/09/2006

Electronic Signature of Signing Officer or Director

Date