

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K74607

Entity Name: C & B MOVING CO., INC.

FILED  
Apr 26, 2005  
Secretary of State

## Current Principal Place of Business:

C/O CRAIG SHAW  
1200 SOUTH HIGHWAY 85  
CRESTVIEW, FL 32536

## Current Mailing Address:

C/O CRAIG SHAW  
1200 SOUTH HIGHWAY 85  
CRESTVIEW, FL 32536

## New Principal Place of Business:

C/O CRAIG SHAW  
120 W. WILLIAMS AVE  
CRESTVIEW, FL 32536

## New Mailing Address:

C/O CRAIG SHAW  
120 W. WILLIAMS AVE  
CRESTVIEW, FL 32536

FEI Number: 59-2942833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAW, CRAIG  
1200 SOUTH HIGHWAY 85  
CRESTVIEW, FL 32536 US

## Name and Address of New Registered Agent:

SHAW, CRAIG  
120 W. WILLIAMS AVE  
CRESTVIEW, FL 32536 US

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: \_\_\_\_\_

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SHAW, CRAIG,  
Address: 1200 S. FERDON BLVD  
City-St-Zip: CRESTVIEW, FL 32536

Title: VTD ( ) Delete  
Name: SHAW, FOY,  
Address: 339 ADAMS DR  
City-St-Zip: CRESTVIEW, FL 32536

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SHAW, CRAIG,  
Address: 120 W. WILLIAMS AVE  
City-St-Zip: CRESTVIEW, FL 32536

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CRAIG SHAW

PD

04/26/2005

Electronic Signature of Signing Officer or Director

Date