

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 08:00 A
Secretary of State

DOCUMENT # P01000112434

1. Entity Name
PROBERT & GANDY ENTERPRISES, INC.



Principal Place of Business
**610 ST PATRICK DR
TALLAHASSEE, FL 32310**

Mailing Address
**610 ST PATRICK DR
TALLAHASSEE, FL 32310**



02272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0562778

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**JOHNSON, BARBARA
373 E JEFFERSON ST
QUINCY, FL 32351**

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PROBERT, WILLIAM C
STREET ADDRESS	610 ST PATRICK DR
CITY-ST-ZIP	TALLAHASSEE, FL 32310
TITLE	D
NAME	PROBERT, BETTY G
STREET ADDRESS	610 ST PATRICK DR
CITY-ST-ZIP	TALLAHASSEE, FL 32310
TITLE	D
NAME	GANDY, JAMES A
STREET ADDRESS	735 MERRY ROBIN RD
CITY-ST-ZIP	TALLAHASSEE, FL 32310
TITLE	D
NAME	TAYLOR, JAMES W JR.
STREET ADDRESS	9414 YASHUNTAFUN RD.
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/21/07-80009-012 150.00

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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 all other like empowered.

SIGNATURE: *Betty Probert - Betty Probert Secretary* **3-9-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #