

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050127

Entity Name: KOBY ASSOCIATES, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

800 DUCK KEY DRIVE  
MARATHON, FL 33050

## New Principal Place of Business:

## Current Mailing Address:

800 DUCK KEY DRIVE  
MARATHON, FL 33050 US

## New Mailing Address:

800 DUCK KEY DRIVE  
MARATHON, FL 33050

FEI Number: 16-1723132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOBY, MICHELLE  
800 DUCK KEY DRIVE  
MARATHON, FL 33050 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: PRES ( ) Delete  
Name: MICHELLE, KOBY  
Address: 800 DUCK KEY DRIVE  
City-St-Zip: MARATHON, FL 33050 US

Title: VICE ( ) Delete  
Name: ROBINSON, SANDRA M  
Address: 2000 CO CO PLUM DRIVE #101  
City-St-Zip: MARATHON, FL 33050 US

Title: SEC ( ) Delete  
Name: STUTZMAN, LAURA D  
Address: 10901 BRIGHTON BAY BLVD. NE APT 4214  
City-St-Zip: ST PETERSBURG, FL 33716 US

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MICHELLE, KOBY  
Address: 800 DUCK KEY DRIVE  
City-St-Zip: MARATHON, FL 33050 US

Title: VP (X) Change ( ) Addition  
Name: ROBINSON, SANDRA M  
Address: 57510 MORTON STREET  
City-St-Zip: MARATHON, FL 33050 US

Title: S (X) Change ( ) Addition  
Name: STUTZMAN, LAURA D  
Address: 4419 W. EUCLID AVENUE  
City-St-Zip: TAMPA, FL 33629 US

Title: T ( ) Change (X) Addition  
Name: WILLIAMSON, ROBERT  
Address: P.O. BOX 431  
City-St-Zip: LONG KEY, FL 33001

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: MICHELLE KOBY

P

04/24/2009

Electronic Signature of Signing Officer or Director

Date