

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073207

FILED
May 09, 2007
Secretary of State

Entity Name: ROBBINS CHARTER COACH, INC.

Current Principal Place of Business:

67062 JACOBS ROAD
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 117
YULEE, FL 32041

New Mailing Address:

FEI Number: 51-0467936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBBINS, SAMUEL J
67062 JACOBS ROAD
YULEE, FL 32097 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: P () Delete
Name: ROBBINS, SAMUEL J
Address: 67062 JACOBS ROAD
City-St-Zip: YULEE, FL 32097

Title: T () Delete
Name: ROBBINS, TAMMY
Address: 67062 JACOBS ROAD
City-St-Zip: YULEE, FL 32097

Title: V () Delete
Name: ROBBINS, BRENON J
Address: 5117 ARBOR POINTE CIRCLE #613
City-St-Zip: TAMPA, FL 33617

Title: S () Delete
Name: ROBERTS, CRYSTAL
Address: 2659 LESABRE PL
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: ROBBINS, BRENON J
Address: 97 WINDSOR WAY
City-St-Zip: RIVERDALE, GA 30274

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

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: SAMUEL ROBBINS

PRES

05/09/2007

Electronic Signature of Signing Officer or Director

Date