2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# P03000143692

Entity Name: JOHN KOLB SERVICES, INC.

Current Principal Place of Business:

5112 HOWARD CREEK RD
SARASOTA, FL 34241

New Principal Place of Business:

Current Mailing Address:

5112 HOWARD CREEK RD
SARASOTA, FL 34241

New Mailing Address:

FEI Number: 02-0712632 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOLB, JOHN W JR
5112 HOWARD CREEK RD
SARASOTA, FL 34241 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:	KOLB, JOHN W JR.	
Address:	5112 HOWARD CREEK RD	
City-St-Zip:	SARASOTA, FL 34241	
Title:	V	( ) Delete
Name:	KOLB, DANIEL M	
Address:	13129 SHERMAN DR	
City-St-Zip:	HUDSON, FL 34667	
Title:	V	( ) Delete
Name:	KOLB, DAVID A	
Address:	3350 ALAMO DR	
City-St-Zip:	SARASOTA, FL 34235	
Title:	S	( ) Delete
Name:	KAMMERLING, MARION K	
Address:	1137 D CHESTER CT	
City-St-Zip:	GUN POWDER, MD 21010	
Title:	T	( ) Delete
Name:	MORRISON, LORI M	
Address:	1815 THISTLE CT	
City-St-Zip:	WESLEY CHAPEL, FL 33543	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	KAMMERLING, MARION K	
Address:	215 WHIPPORWILL LN, E.	
City-St-Zip:	RICHMOND HILLS, GA 31324	
Title:	T	(X) Change ( ) Addition
Name:	MORRISON, LORI M	
Address:	17013 SHADY PINES DR.	
City-St-Zip:	LUTZ, FL 33548	

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: JOHN W. KOLB, JR. P 04/24/2008

Electronic Signature of Signing Officer or Director Date