


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P03000149370</b>	
1. Entity Name <b>WILLIAM MOSES INC</b>	

Principal Place of Business <b>13919 PEACE BLVD SPRING HILL, FL 34610</b>	Mailing Address <b>13919 PEACE BLVD SPRING HILL, FL 34610</b>
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01252008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0486909</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>MOSES, WILLIAM 13919 PEACE BLVD SPRING HILL, FL 34610</b>
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**DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U00000861115 04/02/08-80089-010 150.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOSES, WILLIAM 13919 PEACE BLVD SPRING HILL, FL 34610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MOSES, LOIS 13919 PEACE BLVD SPRING HILL, FL 34610
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**DO NOT WRITE 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.

<b>SIGNATURE:</b> <u>William Moses</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>07271 514-6374</u> <small>Date Daytime Phone #</small>
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