

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000113083

Entity Name: SB CONSULTING, INC.

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

712 CAMELIA TRAIL  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

712 CAMELIA TRAIL  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

FEI Number: 20-1474976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOLFE, DONALD W  
712 CAMELIA TRAIL  
ST. AUGUSTINE, FL 32086 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  
Name: WOLFE, DONALD W PRES.  
Address: 712 CAMELIA TRAIL  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: VP  
Name: WOLFE, BRYAN D VP  
Address: 2322 HALES RD.  
City-St-Zip: RALEIGH, NC 27608 US

Title: SEC/  
Name: WOLFE, BETTY B S/T  
Address: 712 CAMELIA TRAIL  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

I hereby 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 all other like empowered.

SIGNATURE: DONALD W. WOLFE

PRES

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date