

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000010559

1. Entity Name
FRAMING BY ROBIN, INC.



Principal Place of Business
731 7TH ST. W.
PALMETTO, FL 34221-4721

Mailing Address
731 7TH ST. W.
PALMETTO, FL 34221-4721



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2225267

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SNYDER, DONALD H CPA
5603 26TH ST. W.
BRADENTON, FL 34207

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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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME TAYLOR, ROBIN
STREET ADDRESS 731 7TH ST. W.
CITY-ST-ZIP PALMETTO, FL 342214721

TITLE VP
NAME TAYLOR, ROBIN
STREET ADDRESS 731 7TH ST. W.
CITY-ST-ZIP PALMETTO, FL 342214721

TITLE S
NAME TAYLOR, ROBIN
STREET ADDRESS 731 7TH ST. W.
CITY-ST-ZIP PALMETTO, FL 342214721

TITLE T
NAME TAYLOR, ROBIN
STREET ADDRESS 731 7TH ST. W.
CITY-ST-ZIP PALMETTO, FL 342214721

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000807048
02/06/08-80067-004 150.00

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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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

128-2008 723-1487 (941)