2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028162

Entity Name: TAB ENTERPRISE INC.

HIGH SPRINGS, FL 32655

City-St-Zip:

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: POST OFFICE BOX 2595 1040 SW CR 778 HIGH SPRINGS, FL 32655 HIGH SPRINGS, FL 32643 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 2595 P O BOX 2595 HIGH SPRINGS, FL 32655 HIGH SPRINGS, FL 32655 FEI Number: 20-4401281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BING, TERRYNCE L 1040 SW CR 778 HIGH SPRINGS, FL 32643 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition BING, TERRYNCE L Name: Name: POST OFFICE BOX 2595 Address: Address: City-St-Zip: HIGH SPRINGS, FL 32655 City-St-Zip: Title: Title: () Change () Addition () Delete Name: BING, TERRYNCE L Name: POST OFFICE BOX 2595 Address: 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: TERRYNCE L BING PVST 04/10/2009