

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071664

FILED
Jan 16, 2009
Secretary of State

Entity Name: GRAHAM C WEBSTER BOBCAT SERVICES INC

Current Principal Place of Business:

4219 11TH STREET SW
LEHIGH ACRES, FL 33971

New Principal Place of Business:

4219 11TH STREET SW
LEHIGH ACRES, FL 33971 US

Current Mailing Address:

4219 11TH STREET SW
LEHIGH ACRES, FL 33971

New Mailing Address:

4219 11TH STREET SW
LEHIGH ACRES, FL 33971 US

FEI Number: 65-1279860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBSTER SR, GRAHAM C
4219 11TH STREET SW
LEHIGH ACRES, FL 33971 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: WEBSTER, GRAHAM C SR
Address: 4219 11TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP (X) Delete
Name: COULTAS, PAUL T
Address: 1409 SCENIC STREET
City-St-Zip: LEHIGH ACRES, FL 339361106

Title: S () Delete
Name: CARLSON, TIMOTHY S
Address: 418 AVALON DRIVE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEBSTER, GRAHAM C SR
Address: 4219 11TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CARLSON, TIMOTHY S
Address: 418 AVALON DRIVE
City-St-Zip: CAPE CORAL, FL 33904 US

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: GRAHAM C WEBSTER SR

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date