

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109437

FILED
Mar 05, 2007
Secretary of State

Entity Name: MOBLEY BOOKKEEPING SERVICES, INC

Current Principal Place of Business:

3930 SW 16TH STREET
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

3950 SW 16TH STREET
OKEECHOBEE, FL 34974 US

Current Mailing Address:

3930 SW 16TH STREET
OKEECHOBEE, FL 34974 US

New Mailing Address:

3950 SW 16TH STREET
OKEECHOBEE, FL 34974 US

FEI Number: 20-5422304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOBLEY, PATRICIA
3930 SW 16TH STREET
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

MOBLEY, PATRICIA
3950 SW 16TH STREET
OKEECHOBEE, FL 34974 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:

03/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOBLEY, PATRICIA
Address: 3930 SW 16TH STREET
City-St-Zip: OKEECHOBEE, FL 34974 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MOBLEY, PATRICIA
Address: 3950 SW 16TH STREET
City-St-Zip: OKEECHOBEE, FL 34974 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA MOBLEY

PRES

03/05/2007

Electronic Signature of Signing Officer or Director

Date