

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000051400

Entity Name: BARBARA OGBURN, PA

FILED  
Apr 04, 2008  
Secretary of State

**Current Principal Place of Business:**

2671 MARION DR  
BONIFAY, FL 32425

**New Principal Place of Business:**

**Current Mailing Address:**

2671 MARION DR  
BONIFAY, FL 32425

**New Mailing Address:**

FEI Number: 20-8933845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

OGBURN, BARBARA  
2671 MARION DR  
BONIFAY, FL FL US

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

OGBURN, BARBARA  
2671 MARION DR  
BONIFAY, FL FL 32425 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

04/04/2008

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: OGBURN, BARBARA  
Address: 2671 MARION DR  
City-St-Zip: BONIFAY, FL 32425

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
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: BARBARA OGBURN

Electronic Signature of Signing Officer or Director

P

04/04/2008

Date