2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000088246

Entity Name: F.B. NET, INC

City-St-Zip:

FT MYERS, FL 33901 US

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MARTIN LUTH 5, FL 33901	ER KING BLVD US			
Current Mailing Address:			New Mailing Addres	s:	
	MARTIN LUTH 5, FL 33901	ER KING BLVD US			
FEI Number	: 26-3450453	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
		ER KING BLVD US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DARROW, RA	TIN LUTHER KING BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DARROW, KIN	TIN LUTHER KING BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DARROW, RO) Delete BERT TIN LUTHER KING BLVD	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: KIM DARROW STD 04/27/2009