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Jun 06, 2007 8:00 am
Secretary of State
05-03-2007 90061 019 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000022757

1. Entity Name
WEB PROPERTIES, INC.

66018000

Principal Place of Business	Mailing Address
506 N RIVERSIDE DRIVE NEW SMYRNA BEACH, FL 32168	PO BOX 1685 NEW SMYRNA BEACH, FL 32170-1685

01232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3180534
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

OSWALD, KENNETH F ESQ.
600 COURTLAND STREET
SUITE 110
ORLANDO, FL 32804

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EVANS, JERRY C
STREET ADDRESS	PO BOX 1685
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 321701685
TITLE	SD
NAME	BOYD, SCOTT T
STREET ADDRESS	7586 W SAND LAKE RD
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By: Jerry C. Evans 5/30/07 386-423-8884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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ATTACHMENT
660018080

DOCUMENT # P93000022757

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