

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000002185

Entity Name: ROBESON ENTERPRISES, INC.

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

18902 CRESCENT RD  
ODESSA, FL 33556

## New Principal Place of Business:

18886 CRESCENT RD  
ODESSA, FL 33556

## Current Mailing Address:

18902 CRESCENT RD  
ODESSA, FL 33556

## New Mailing Address:

18886 CRESCENT RD  
ODESSA, FL 33556

FEI Number: 59-3215477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, PETER F  
18902 CRESCENT RD  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

ROBERTS, PETER F  
18886 CRESCENT RD  
ODESSA, FL 33556 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: \_\_\_\_\_

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: ROBERTS, PETER F  
Address: 18902 CRESCENT RD  
City-St-Zip: ODESSA, FL 33556

Title: DS ( ) Delete  
Name: DODSON, FRANK E  
Address: 708 ANCLOTE DR.  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: V-P (X) Delete  
Name: PETERSON, KENNETH  
Address: 3217 KISMET COURT  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: ROBERTS, PETER F  
Address: 18886 CRESCENT RD  
City-St-Zip: ODESSA, FL 33556

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

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: PETER F. ROBESON

DPT

04/27/2007

Electronic Signature of Signing Officer or Director

Date