2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2009
Secretary of State

DOCUMENT# P94000047328

Entity Name: FORBES, INC.

Current Principal Place of Business:

3301 OCEAN DRIVE
VERO BEACH, FL 32963 US

New Principal Place of Business:

Current Mailing Address:

756 CYPRESS RD
VERO BEACH, FL 32963

New Mailing Address:

3301 OCEAN DRIVE
VERO BEACH, FL 32963 US

FEI Number: 65-0499115 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'HAIRE, MICHAEL
3111 CARDINAL DR.
VERO BEACH, FL US

Name and Address of New Registered Agent:

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 Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: O HAIRE, THOMAS
Address: 756 CYPRESS RD
City-St-Zip: VERO BEACH, FL

Title: VD ( ) Delete
Name: MCCRAKEN, SHELAGH O
Address: 3301 OCEAN DRIVE
City-St-Zip: VERO BEACH, FL

Title: SD ( ) Delete
Name: O HAIRE, GAIL
Address: 3301 OCEAN DR
City-St-Zip: VERO BEACH, FL 32963

Title: TD ( ) Delete
Name: METZ, EIRN O
Address: 3301 OCEAN DR
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: SCHELL, KELLY O
Address: 3301 OCEAN DR
City-St-Zip: VERO BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: O HAIRE, THOMAS
Address: 756 CYPRESS RD
City-St-Zip: VERO BEACH, FL 32963

Title: VD (X) Change ( ) Addition
Name: MCCRACKEN, SHELAGH O
Address: 3301 OCEAN DRIVE
City-St-Zip: VERO BEACH, FL 32963

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

Title: TD (X) Change ( ) Addition
Name: METZ, ERIN O
Address: 3301 OCEAN DR
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Change ( ) Addition
Name: SCHELL, KELLY O
Address: 3301 OCEAN DR
City-St-Zip: VERO BCH, FL 32963

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: ERIN O. METZ TD 07/01/2009
Electronic Signature of Signing Officer or Director Date