2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2008 08:00 AN Secretary of State

DOCUMENT	~# P95000056762	2
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1. Entity Name

HERBERT M. WEBB, P.A.



Principal Place of Business

Mailing Address

4400 NW 23 AVE

4400 NW 23 AVE

SUITE E

GAINESVILLE, FL 32606

SUITE E GAINESVILLE, FL 32606



DO NOT WRITE IN THIS SPACE

04172008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3327402

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEBB, HERBERT M 4400 NW 23 AVE SUITE E GAINESVILLE, FL 32606

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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							
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEBB, HERBERT M 4400 NW 23 AVE SUITE E GAINESVILLE, FL 32606						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							

DO NOT WRITE IN THIS SPACE

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:

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-S1-ZIP

CITY-ST-ZIP

HATURE AND TYPED ON PRINTED AND OF MICHING OFFICER OR DIRECTOR

APRIL 17,2008

352-372-5546

Davime Phone