

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90239 044 ***150.00

DOCUMENT # P96000048653

1. Entity Name
NO. 1 B., INC.



Principal Place of Business
1057 KNOLL COVE
JACKSONVILLE, FL 32221

Mailing Address
1057 KNOLL COVE
JACKSONVILLE, FL 32221

2. Principal Place of Business - No P.O. Box #
5301 Lenox Avenue

3. Mailing Address
5321 Carder ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04242007 Chg-P CR2E034 (12/06)

City & State
Jacksonville, Florida

City & State
Jacksonville, Florida

4. FEI Number
59-3384219

Applied For
Not Applicable

Zip
32205

Country
USA

Zip
32205

Country
USA

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

6. Name and Address of Current Registered Agent

JOHNSON, BRITTANY F
1057 KNOLL COVE
JACKSONVILLE, FL 32221

7. Name and Address of New Registered Agent

Name
William H. Johnson

Street Address (P.O. Box Number is Not Acceptable)

5321 Carder Street

City
Jacksonville

FL Zip Code
32205

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 **William H. Johnson**

William H. Johnson

4-24-07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
JOHNSON, BRITTANY F
1057 KNOLL COVE
JACKSONVILLE, FL 32221 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOHNSON, WILLIAM H JR
1057 KNOLL COVE
JACKSONVILLE, FL 32221 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Johnson, William H.
5321 Carder Street
Jacksonville, FL 32205 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V, D
Vicki L. Fair
5321 Carder Street
Jacksonville, FL 32205 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: **William H. Johnson President**

William H. Johnson 4/24/07

Date

904-412 3849