


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90097 043 ***150.00

DOCUMENT # P96000048912			
1. Entity Name RICHARD B. WEBBER II, P.A.			
Principal Place of Business 320 MAITLAND AVE. ALTAMONTE SPRINGS FL 32701 US		Mailing Address 320 MAITLAND AVE. ALTAMONTE SPRINGS FL 32701 US	
2. Principal Place of Business - No P.O. Box # 1741 Laurel Road Suite, Apt. #, etc. Winter Park, FL		3. Mailing Address 1741 Laurel Road Suite, Apt. #, etc.	
City & State 32789		City & State Winter Park, FL	
Zip USA	Country USA	Zip 32789	Country USA
6. Name and Address of Current Registered Agent WEBBER, RICHARD B II 320 MAITLAND AVE. ALTAMONTE SPRINGS FL 32701		7. Name and Address of New Registered Agent Name: Webber II, Richard B. Street Address (P.O. Box Number is Not Acceptable): 1741 Laurel Road City: Winter Park FL Zip Code: 32789	
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: <i>Richard B. Webber II</i> DATE: 1/27/07 <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WEBBER, RICHARD B II 320 MAITLAND AVE. ALTAMONTE SPRINGS FL 32701 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1741 Laurel Road Winter Park, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Richard B. Webber II* *Richard B. Webber II* 1/27/07 407-831-8360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #