

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000088080

FILED
Mar 08, 2007
Secretary of State

Entity Name: BOBCAT OF NORTH FLORIDA, INC.

Current Principal Place of Business:

3880 FIRESTONE RD
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

3810 FIRESTONE RD
JACKSONVILLE, FL 32210 US

Current Mailing Address:

3880 FIRESTONE RD
JACKSONVILLE, FL 32210 US

New Mailing Address:

3810 FIRESTONE RD
JACKSONVILLE, FL 32210 US

FEI Number: 59-3409640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, III C H
233 E. BAY STREET, SUITE 930
JACKSONVILLE, FL 32202 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: LANE, GARY W
Address: 3240 LAKESHORE BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: ST () Delete
Name: LANE, TERESA
Address: 1474 ARENA ROAD
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: NANCY SMITH

MGR

03/08/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date