


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000093184	
1. Entity Name WEBBQOM CORPORATION	

Principal Place of Business 4801 ST. JOHNS AVENUE PALATKA, FL 32177	Mailing Address PO BOX 837 PALATKA, FL 32178
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DO NOT WRITE IN THIS SPACE



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3477268	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WEBB, ROBERT W 4801 ST. JOHNS AVENUE PALATKA, FL 32177	
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

UN0000185386
01/21/05-80013-018 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO WEBB, ROBERT W 4801 ST. JOHNS AVENUE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WEBB, DOUGLAS E 4801 ST. JOHNS AVENUE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WEBB, HAZEL B 4801 ST. JOHNS AVENUE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **ROBERT W. WEBB**
PRESIDENT 1/17/05 386-328-1955
Date Daytime Phone #