


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000015810 1. Entity Name THE IBIS CORPORATION	
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Principal Place of Business 1457 ROLLING RIDGE RD PALM HARBOR, FL 34683	Mailing Address 1457 ROLLING RIDGE RD PALM HARBOR, FL 34683
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DO NOT WRITE IN THIS SPACE



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3498273	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 TECKMAN, GARY M 1457 ROLLING RIDGE RD PALM HARBOR, FL 34683

**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 <u><i>Gray M. Teckman</i></u> <u><i>Gray M. Teckman</i></u> <u><i>1/11/08</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE</small>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000785850 01/17/08-80018-006 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP TECKMAN, CLAUDIA J 1457 ROLLING RIDGE RD PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TECKMAN, GARY M 1457 ROLLING RIDGE RD PALM HARBOR, FL 34683
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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 file empowered. SIGNATURE: <u><i>Gray M. Teckman</i></u> <u><i>1/11/08</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
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