## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000017145

City-St-Zip:

LAKELAND, FL 33805 US

Entity Name: OB & ASSOCIATES OF FLORIDA IN

FILED Apr 28, 2008 Secretary of State

Entity Nar	ne: QB&A	SSOCIATES OF FLORIDA, INC			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3602 DMG BLDG #1 LAKELANI	DRIVE D, FL 33811	US	704 N. COMBEE ROAD LAKELAND, FL 33801	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
P.O BOX 2 LAKELANI	24732 D, FL 33802	4732 US			
FEI Number:	59-2880269	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
3602 - 1 DI	Y, EARLEY MG DRIVE D, FL 33811		MC KINLEY, EARLEY III 704 N. COMBEE ROAD LAKELAND, FL 33801	US	
	named entit e of Florida.	y submits this statement for the p	ourpose of changing its registered c	office or registered agent, or both,	
SIGNATURE:				04/28/2008	
	Electr	onic Signature of Registered Age	ent	Date	
Election Car	npaign Financ	ing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MCKINLEY, PO BOX 247		Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	MCKINLEY, P.O BOX 24		Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	PICKETT, E.	( ) Delete T. III DN POINT COURT	Title: ( ) Name: Address:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: SHERYL MCKINLEY V/S 04/28/2008