

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M96344

**Entity Name:** T.B. OF STARKE, INC.

**Current Principal Place of Business:**

808 S WALNUT  
STARKE, FL 32091

**FILED**  
**Mar 23, 2015**  
**Secretary of State**  
**CC1065864078**

**Current Mailing Address:**

798 S.W. MAIN BLVD.  
LAKE CITY, FL 32025 US

**FEI Number: 59-2907368**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MOSES, MICHAEL C  
798 SW MAIN BLVD.  
LAKE CITY, FL 32025 US

*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

**Officer/Director Detail :**

Title P  
Name MOSES, MICHAEL C  
Address 798 SW MAIN BLVD.  
City-State-Zip: LAKE CITY FL 32025

Title V  
Name SMITH, STEPHEN A  
Address 153 NE MADISON STREET  
City-State-Zip: LAKE CITY FL 32025

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL C. MOSES**

**PRESIDENT**

**03/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date