

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 560304

FILED  
May 19, 2009  
Secretary of State

Entity Name: STAN WEAVER AND COMPANY

**Current Principal Place of Business:**

4607 N CORTEZ AVE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

4607 N CORTEZ  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 59-1783691      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WEAVER, STAN  
4607 N CORTEZ AVE  
TAMPA, FL 33614 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: WEAVER, CHARLES S.  
Address: 124 WESTGATE  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: ST ( ) Delete  
Name: ROBERTS, G D  
Address: 10856 BAYSHORE DR  
City-St-Zip: WINDERMERE, FL 34786

Title: P ( ) Delete  
Name: ROBERTS, CAROL  
Address: 10856 BAYSHORE DR  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: CHARLES S. WEAVER

VP

05/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date