2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2004 8:00 am
Secretary of State
06-01-2004 90002 013 ***150.00

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DOCUMENT # P02000106152

1. Entity Name
STONECRAFTERS, INC.

Principal Place of Business	Mailing Address
1420 CYPRESS AVE. MELBOURNE, FL 32935	1420 CYPRESS AVE. MELBOURNE, FL 32935

DO NOT WRITE IN THIS SPACE

02202004 No Chg-P CR2E034 (10/03)

4. FEI Number
75-3083689
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSSI, TERRY C
1420 CYPRESS AVE.
MELBOURNE, FL 32935

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROSSI, TERRY C
STREET ADDRESS	1420 CYPRESS AVE.
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	V
NAME	GUARINO, ANTHONY
STREET ADDRESS	1420 CYPRESS AVE.
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE 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)(i), 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: _____ 4/30/04 321-752-8002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

#P02000106152

S40S39 38

Stonecrafters Inc.
1420 Cypress Ave.
Melbourne, Fl. 32935

To Whom It May Concern,

Stonecrafters did not ever receive any notification for our annual report. I have enclosed a check in the balance of $150.00. If you have any further needs or questions, feel free to contact me.

Sincerely,
Shawna Wilkinson
(Secretary)

Office 321-752-8002
Fax 321-752-7794