

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075509

**FILED**  
**Mar 13, 2008**  
**Secretary of State**

**Entity Name:** KINCZEL-STRINGFELLOW, INC.

**Current Principal Place of Business:**

294 PATRICIA ROAD  
ROLLINSVILLE, CO 80474

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1754  
NEDERLAND, CO 80466

**New Mailing Address:**

**FEI Number:** 86-1139018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KINCZEL, JOSEPH  
967 FITZHUGH STREET  
SANIBEL, FL 33957 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KINCZEL, JOSEPH  
Address: PO BOX 1754  
City-St-Zip: NEDERLAND, CO 80466

Title: V ( ) Delete  
Name: KINCZEL, LORI  
Address: PO BOX 1754  
City-St-Zip: NEDERLAND, CO 80466

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

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: JOSEPH A. KINCZEL

MR

03/13/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date