

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076190

FILED  
Jan 03, 2006  
Secretary of State

Entity Name: STUTZMAN BROTHERS PROPERTY MAINTENANCE, INC.

**Current Principal Place of Business:**

39144 TOWNSEND ROAD  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

39144 TOWNSEND ROAD  
DADE CITY, FL 33525

**New Mailing Address:**

FEI Number: 20-2975435      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STUTZMAN, DANIEL  
39144 TOWNSEND ROAD  
DADE CITY, FL 33525      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:            DPS            ( ) Delete  
Name:            STUTZMAN, DANIEL  
Address:        39144 TOWNSEND ROAD  
City-St-Zip:    DADE CITY, FL 33525

Title:            DVT            ( ) Delete  
Name:            STUTZMAN, ERIC  
Address:        8036 HOBART DR  
City-St-Zip:    ZEPHYRHILLS, FL 33540

Title:                            ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title:            SEC            ( ) Change (X) Addition  
Name:            STUTZMAN, LOYAL  
Address:        32950 PRICEBORO DRIVE  
City-St-Zip:    HARRISBURG, OR 97446

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL STUTZMAN

DPS

01/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date