

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006548

FILED
Apr 26, 2009
Secretary of State

Entity Name: THE STACI STEPHENS FUND, INC.

Current Principal Place of Business:

14594 DOVER FOREST DRIVE
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

14594 DOVER FOREST DRIVE
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 56-2594151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, KRISTEN E PRES
14594 DOVER FOREST DRIVE
ORLANDO, FL 32828 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEPHENS, KRISTEN
Address: 14594 DOVER FOREST DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: VP () Delete
Name: BECKMAN, MICHELLE
Address: 10600 BLOOMFIELD DRIVE #313
City-St-Zip: ORLANDO, FL 32825

Title: S () Delete
Name: WEBER, BARBARA
Address: 4985 PANTHER LN
City-St-Zip: MIMS, FL 32754

Title: T () Delete
Name: ARCHER, PHIL
Address: 3058 FOLSOM ROAD
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: STEPHENS, BARRY
Address: 14594 DOVER FOREST DRIVE
City-St-Zip: ORLANDO, FL 32828

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTEN E. STEPHENS

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

Date