2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 326048

Name:

Address: City-St-Zip: FELLMAN, ROBERT

6080 OKEECHOBEE BLVD. #200

WEST PALM BEACH, FL 33417

Entity Name: HOWARD B. STEVENS, INC.

FILED Mar 06, 2008 Secretary of State

Current Pr	incipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	ECHOBEE BL	VD			
STE 200 WPB, FL 3	33417 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
6080 OKEECHOBEE BLVD					
STE 200 WPB, FL 3	33417 US				
FEI Number:	59-1206530	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	HOWARD J ECHOBEE BL 33417 US	VD			
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (FELLMAN, HOV 6080 OKEECH WPB, FL 3341	HOBEE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FELLMAN, STE 6080 OKEECH) Delete EVEN OBEE BLVD. #200 EACH, FL 33417	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	Т () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HOWARD FELLMAN P 03/06/2008