

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 29, 2004 8:00 am**  
**Secretary of State**

03-29-2004 90038 029 \*\*\*150.00

**DOCUMENT # 334232**

1. Entity Name

**DOWNING'S FORGE, INC.**



Principal Place of Business

**1167 - 34 STREET SOUTH  
ST PETERSBURG FL 33711-9293**

Mailing Address

**1167 - 34 STREET SOUTH  
ST PETERSBURG FL 33711-9293**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1218545**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STUTLER, CANDICE  
13916-76TH AVE.  
LARGO FL 33771**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004. Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PDT** ☐ Delete  
NAME **STUTLER, CANDICE**  
STREET ADDRESS **13916-76TH AVE.**  
CITY-ST-ZIP **SEMINOLE FL 33776**

TITLE **VP** ☒ Delete  
NAME **STUTLER, KENT**  
STREET ADDRESS **13916-76TH AVE.**  
CITY-ST-ZIP **SEMINOLE FL 33776**

TITLE **S** ☐ Delete  
NAME **ROBINSON, KAREN LAMPING**  
STREET ADDRESS **3700 FELIZ CREEK RD**  
CITY-ST-ZIP **HOPLAND CA 95449**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S, VP** ☒ Change ☐ Addition  
NAME **Robinson, Karen Lamping**  
STREET ADDRESS **3700 Feliz Creek RD**  
CITY-ST-ZIP **Hopland, CA 95449**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*C Statler*

**Candice Statler**

**3-25-04**

**727 327-9028**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #