


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 691264
 1. Entity Name
JERE STAMBAUGH, III, INC.



Principal Place of Business Mailing Address
 107 MASSASOIT ST 107 MASSASOIT ST
 AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 US

DO NOT WRITE IN THIS SPACE



02032006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2108885	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
STAMBAUGH, JERE L., III
107 MASSASOIT ST
AUBURNDALE, FL

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STAMBAUGH, JERE L, III 209 OSCEOLA STREET AUBURNDALE, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT STAMBAUGH, HANNAH W 1606 ARIANA BLV POB 275 AUBURNDALE, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STAMBAUGH, ROSEMARY 209 OSCEOLA ST AUBURNDALE, FL 33823,
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Jere Stambaugh III 2-3-06 863-967-3292
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone If