

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761954

Entity Name: OLD STANTON, INC.

FILED
Apr 22, 2007
Secretary of State

Current Principal Place of Business:

2787 PERCY ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

2787 PERCY ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-2230026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, ROBERT L.
2787 PERCY ROAD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

MITCHELL, ROBERT L
2787 PERCY ROAD
JACKSONVILLE, FL 32218 US

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: ROBERT L. MITCHELL

04/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: MITCHELL, ROBERT L.,
Address: 2787 PERCY ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: AIKENS, CHESTER A.,
Address: 305 E. UNION STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: SIMMONS, CHARLES E., JR
Address: 1980 W EDGEWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL

Title: S () Delete
Name: MCINTOSH, C.B.
Address: 4063 RIBAUT RIVER LANE
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: GIRARDEAU, ARNETT E
Address: 4215 RIBAUT RIVER LANE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: MCLENDON-WILLIAMS, PRISCILLA
Address: 2421 ST. LEDGER DRIVE
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: MITCHELL, ROBERT L
Address: 2787 PERCY ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: D (X) Change () Addition
Name: AIKENS, CHESTER A
Address: 305 E. UNION STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change () Addition
Name: SIMMONS, CHARLES E
Address: 1980 W EDGEWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL

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 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: ROBERT L. MITCHELL

DC

04/22/2007

Electronic Signature of Signing Officer or Director

Date