2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#812285

Entity Name: EDWIN B. STIMPSON COMPANY, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
900 SYLVAN AVENUE BAYPORT L. I., NY 11705			26 CENTRAL AVE HAUPPAUGE, NY	26 CENTRAL AVE HAUPPAUGE, NY 11788	
Current M	lailing Addre	ss:	New Mailing Addr	New Mailing Address:	
1515 SW 1 POMPANO	13TH CT O BEACH, FL	33069			
FEI Number	: 11-1373230	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address	s of New Registered Agent:	
1201 HAYS SUITE 105 TALLAHAS	S STREET SSEE, FL 323				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	RAU, HOWARI 1515 SW 13TH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP (THOMAS, SCO 1515 SW 13TH POMPANO BC	I CT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	RAU, RALPH E 1515 SW 13TH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DVP (RAUSS, WILLI 1515 SW 13TH POMPANO BE	AM G	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	FORTMULLER 1515 SW 13TH	•	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RAU, JOHN H 1515 SW 18TH) Delete H COURT ACH, FL 33069	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: GEORGE A FORTMULLER DVCF 03/31/2009