2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838745

Entity Name: STONCOR GROUP, INC.

FILED Jan 19, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

1000 EAST PARK AVENUE P. O. BOX 308 MAPLE SHADE, NJ 08052

Current Mailing Address: New Mailing Address:

1000 EAST PARK AVENUE P. O. BOX 308 MAPLE SHADE, NJ 08052

FEI Number: 56-0184790 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 REIF, DAVID P

 Address:
 1000 EAST PARK AVE

 City-St-Zip:
 MAPLE SHADE, NJ 08052

Title: [

Name: RICE, RONALD A
Address: 2628 PEARL RD
City-St-Zip: MEDINA, OH 44256

Title: EVP

 Name:
 FYNAN, MARGARET R

 Address:
 1000 EAST PARK AVE.

 City-St-Zip:
 MAPLE SHADE, NJ 08052

Title:

Name: MOORE, EDWARD W Address: 2628 PEARL ROAD City-St-Zip: MEDINA, OH 44256

Title: CFOT

 Name:
 MCGONIGLE, MARK E

 Address:
 1000 EAST PARK AVE.

 City-St-Zip:
 MAPLE SHADE, NJ 08052

I hereby 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 all other like empowered.

SIGNATURE: MARK E. MCGONIGLE CFOT 01/19/2011