

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006379

FILED
Jan 20, 2006
Secretary of State

Entity Name: STANDING STONE OF CT, INC.

Current Principal Place of Business:

49 RICHMONDVILLE AVE., SUITE 306
WESTPORT, CT 06880

New Principal Place of Business:

Current Mailing Address:

49 RICHMONDVILLE AVE., SUITE 306
WESTPORT, CT 06880

New Mailing Address:

FEI Number: 06-1575899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: BARTOSIC, ALBERT J
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: SD () Delete
Name: WURSTERC, MARK W
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: D () Delete
Name: BARRY, THOMAS C
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: D () Delete
Name: CLARKE, THOMAS J JR.
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: D () Delete
Name: RAY, DAVID K
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: D () Delete
Name: CHOPIN, STEFAN
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WURSTER, MARK W
Address: 49 RICHMONDVILLE AVE., SUITE 306
City-St-Zip: WESTPORT, CT 06880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERT J. BARTOSIC

POD

01/20/2006

Electronic Signature of Signing Officer or Director

Date