

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006600

FILED
Aug 27, 2007
Secretary of State

Entity Name: STEPHEN GOULD CORPORATION

Current Principal Place of Business:

C/O ANTHONY LUPO
35 SOUTH JEFFERSON RD
WHIPPANY, NJ 07981

New Principal Place of Business:

35 SOUTH JEFFERSON ROAD
WHIPPANY, NJ 07981

Current Mailing Address:

C/O ANTHONY LUPO
35 SOUTH JEFFERSON RD
WHIPPANY, NJ 07981

New Mailing Address:

35 SOUTH JEFFERSON ROAD
WHIPPANY, NJ 07981

FEI Number: 22-1550787

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: PD () Delete
Name: GOLDEN, MICHAEL
Address: 35 SOUTH JEFFERSON RD
City-St-Zip: WHIPPANY, NJ 07981

Title: VD () Delete
Name: GOLDEN, JOHN
Address: 1764 LITCHFIELD TURNPIKE
City-St-Zip: WOODBRIDGE, CT 06525

Title: STD (X) Delete
Name: GOLDEN, DAVID
Address: 1764 LITCHFIELD TURNPIKE
City-St-Zip: WOODBRIDGE, CT 06525

Title: V () Delete
Name: GOLDEN, DALE
Address: 45541 NORTHPORT LOOP WEST
City-St-Zip: FREMONT, CA 94538

Title: V () Delete
Name: VAN SLYKE, PETER
Address: 35 SOUTH JEFFERSON RD
City-St-Zip: WHIPPANY, NJ 07981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: VS (X) Change () Addition
Name: VAN SLYKE, PETER
Address: 35 SOUTH JEFFERSON RD
City-St-Zip: WHIPPANY, NJ 07981

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: MITCHELL LAZAR

Electronic Signature of Signing Officer or Director

TAX

08/27/2007

_____ Date