

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Feb 24, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F20077**

1. Entity Name  
**CUSTOM STUCCO, INC.**



Principal Place of Business

**1393 MUSTANG ST  
NOKOMIS, FL 34275 US**

Mailing Address

**6075 PARK BLVD  
STE A  
PINELLAS PARK, FL 33781 US**



01092004 No Chg-P CR2E034 (10/03)

**'DO NOT WRITE IN THIS SPACE**

4. FEI Number **59-2111355** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**SCHRIEFER, GEORGE J  
6075 PARK BLVD.  
PINELLAS PARK, FL 33781**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature: I, print or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

**U00000064403**  
**02/24/04-80010-019 150.00**

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>STD<br/>HEUSS, STEPHEN P.<br/>1393 MUSTANG ST<br/>NOKOMIS, FL</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>P<br/>HEUSS, STEPHEN P.<br/>1393 MUSTANG ST<br/>NOKOMIS, FL</b>   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

**SIGNATURE: STEPHEN P. HEUSS** *Stephen P. Heuss* **2/10/04** **941-484-4525**