


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

Florida Dept of
FILED
Mar 05, 2007 08:00 AM
1175/6358
Secretary of State

DOCUMENT # G06997 1. Entity Name THE STACOLE COMPANY, INC.	
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Principal Place of Business 1003 CLINT MOORE RD BOCA RATON, FL 33487	Mailing Address 1003 CLINT MOORE RD BOCA RATON, FL 33487
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2310892	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LANO, CHRISTOPHER 1003 CLINT MOORE RD BOCA RATON, FL 33487

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANO, CHRISTOPHER 11 OCEAN HARBOUR CIR. OCEAN RIDGE, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LANO, JANET 11 OCEAN HARBOUR CIR. OCEAN RIDGE, FL 33435
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>000000655756 03/13/07-80119-012 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 another like empowered.

SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	2/7/07 Date	561-998-0029 561-998-0029 Daytime Phone #
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