## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 16, 2007 08:00 AM DOCUMENT # G38400 **Secretary of State** STANAHAN CORPORATION Principal Place of Business Mailing Address 1312 W. SUGARLAND HIGHWAY 1312 W. SUGARLAND HIGHWAY CLEWISON, FL 33440 CLEWISON, FL 33440 No Cha-P CR2E034 (11/05) 01042007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2405759 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STANTON, MATTHEW R. DO NOT WRITE 1312 W SUGARLAND HWY CLEWISTON, FL 33440 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE STANTON, MATTHEW RICHARD STREET ADDRESS 1312 W SUGARLAND HWY CLEWISTON, FL CITY-ST-7/P TITLE U00000587196 01/17/07-80023-016 150.00 NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 flue 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 employered 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:

NAME STREET ADDRESS CITY-ST-ZIP

matthew K. Stanto

nlu labot

863-983-81DC

**FILED** 

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