

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G70769

1. Entity Name
EAST STUART INVESTMENTS, INC.



Principal Place of Business
837 MARTIN LUTHER KING BLVD.
STUART, FL 34994 US

Mailing Address
P.O. BOX 1702
STUART, FL 34995

FILED
Aug 30, 2004 08:00 AM
Secretary of State



07032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2357496

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SCOTT, FAY A JR.
906 E LAKE ST
STUART, FL 34994

**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 Fay A. Scott, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/27/04

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
MCHARDY, ALVIN C
P.O. BOX 357
PORT SALERNO, FL 34992

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/D
SAMPSON, WILLIE
720 BAYOU AVE
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
SCOTT, FAY A JR.
906 E LAKE ST
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000171208
08/30/04-80008-025 150.00

**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 19.07(3)(f), 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:

Fay A. Scott, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/04

Date

772-341-8920

Daytime Phone #