

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G91092

FILED
Jan 20, 2009
Secretary of State

Entity Name: STUBBLEFIELD CORPORATION

Current Principal Place of Business:

5179 SW 71 PLACE
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

10285 SHREWSBARY RUN WEST
COLLIERVILLE, TN 38017 US

New Mailing Address:

10285 SHREWSBURY RUN WEST
COLLIERVILLE, TN 38017 US

FEI Number: 59-2457719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUBBLEFIELD, D. AUSTIN
5179 S.W. 71ST PLACE
MIAMI, FL 33155 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: DP () Delete
Name: STUBBLEFIELD, D. AUS, TIN
Address: 5179 SW 71ST PLACE
City-St-Zip: MIAMI, FL 33155 US

Title: D () Delete
Name: STUBBLEFIELD, HARRIE, T H.
Address: 5179 SW 71ST PLACE
City-St-Zip: MIAMI, FL 33155 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: D. AUSTIN STUBBLEFIELD

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date