

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H19599

FILED
Jan 26, 2009
Secretary of State

Entity Name: CUSTOM PLASTERING & STUCCO, INC.

Current Principal Place of Business:

19531 LAN-SHELL DR
NORTH FT. MYERS, FL 33917 US

New Principal Place of Business:

19531 LAN SHELL DR
NORTH FT. MYERS, FL 33917 US

Current Mailing Address:

P O BOX 3938
N FT MYERS, FL 33918938 US

New Mailing Address:

P O BOX 3938
N FT MYERS, FL 339183938 US

FEI Number: 59-2450677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLIKEN, ROBERT S
19531 LAN-SHELL DRIVE
NORTH FT. MYERS, FL 33917 US

Name and Address of New Registered Agent:

MILLIKEN, ROBERT S
19531 LAN SHELL DRIVE
NORTH FT. MYERS, FL 33917 US

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:

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLIKEN, ROBERT S.,
Address: 19531 LAN-SHELL DRIVE
City-St-Zip: N. FORT MYERS, FL

Title: ST () Delete
Name: MILLIKEN, MAUREEN J
Address: 19531 LAN-SHELL DRIVE
City-St-Zip: NORTH FT. MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLIKEN, ROBERT S.,
Address: 19531 LAN SHELL DRIVE
City-St-Zip: N. FORT MYERS, FL

Title: ST (X) Change () Addition
Name: MILLIKEN, MAUREEN J
Address: 19531 LAN SHELL DRIVE
City-St-Zip: NORTH FT. MYERS, FL

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: MAUREEN J. MILLIKEN

ST

01/26/2009

Electronic Signature of Signing Officer or Director

Date