

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90064 031 ***150.00



DOCUMENT # J23598

1. Entity Name
BILL SPERBER STUMP GRINDING SERVICE, INC.

Principal Place of Business Mailing Address
 C/O KURT F. LEWIS C/O KURT F. LEWIS
 620 SHORE RD 620 SHORE RD
 NOKOMIS FL 34275 NOKOMIS FL 34275



2. Principal Place of Business - No P.O. Box #
620 Shore Rd
 Suite, Apt. #, etc.

3. Mailing Address
same
 Suite, Apt. #, etc.

1st MOORE CR2E034 (10/06)

City & State
Nokomis FL
 Zip
34275
 Country
Sarasota

City & State
 City & State
 Zip
 Country

4. FEI Number **59-2700046** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LEWIS, KURT F.
6624 GATEWAY AVENUE
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *Pennie J Sperber President* **2/4/07**
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
 Trust Fund Contribution. **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	<input type="checkbox"/> Delete
VP	SPERBER, PAUL W.	620 SHORE RD	NOKOMIS FL 34275	<input type="checkbox"/>
PD	SPERBER, PENNIE J.	620 SHORE RD	NOKOMIS FL 34275	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: *Pennie J Sperber President* **2/4/07** **941 485 3711**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Jaytime Phone #