

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J29280

FILED
Jan 05, 2006
Secretary of State

Entity Name: STOFFER AND ASSOCIATES, INC.

Current Principal Place of Business:

13902 SMOKERISE CT
ORLANDO, FL 3283 US

New Principal Place of Business:

10381 HART BRANCH CIRCLE
ORLANDO, FL 32832 US

Current Mailing Address:

13902 SMOKERISE CT
ORLANDO, FL 32832 US

New Mailing Address:

10381 HART BRANCH CIRCLE
ORLANDO, FL 32832 US

FEI Number: 59-2709695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOFFER, SHIRLEY
13902 SMOKERSIE CT
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

STOFFER, SHIRLEY
10381 HART BRANCH CIRCLE
ORLANDO, FL 32832 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: SHIRLEY STOFFER

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STOFFER, RANDALL D.,
Address: 13902 SMOKERSIE CT
City-St-Zip: ORLANDO, FL

Title: STD () Delete
Name: STOFFER, SHIRLEY Y.,
Address: 13902 SMOKERSIE CT
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOFFER, RANDALL D.,
Address: 10381 HART BRANCH CIRCLE
City-St-Zip: ORLANDO, FL 32832 US

Title: STD (X) Change () Addition
Name: STOFFER, SHIRLEY Y.,
Address: 10381 HART BRANCH CIRCLE
City-St-Zip: ORLANDO, FL 32832 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SHIRLEY STOFFER

STD

01/05/2006

Electronic Signature of Signing Officer or Director

Date