


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90815 028 \*\*\*150.00

<b>DOCUMENT # M64124</b>		
1. Entity Name COLONY STONE & PLASTERING, INC.		

Principal Place of Business 4775 NORTH LECANTO HIGHWAY BEVERLY HILLS, FL 34465 US	Mailing Address P.O. BOX 183 LECANTO, FL 34460 US
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**40091947**



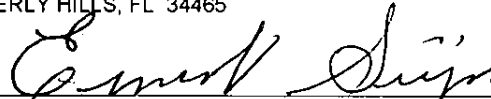
2. Principal Place of Business - No P.O. Box # <b>725 E OVERDRIVE CIRCLE</b>	3. Mailing Address P O BOX 400
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04062007 Chg-P CR2E034 (12/06)

City & State <b>HERNANDO FL 34442</b>	City & State <b>HOLDER FL 34445</b>
Zip Country	Zip Country

4. FEI Number 59-2869121	Applied For Not Applicable
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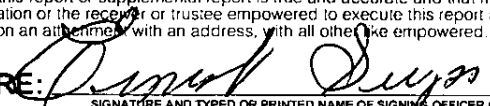
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  SEIJAS JR, ERNEST J VP 4109 WEST PAPOOSE LANE BEVERLY HILLS, FL 34465  	7. Name and Address of New Registered Agent  SEIJAS, JR ERNEST J VP 725 E OVERDRIVE CIRCLE HERNANDO, FL 34442
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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 _____	DATE _____

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEIJAS SR., ERNEST J P P.O. BOX 183 LECANTO, FL 34460 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 725 E OVERDRIVE CIRCLE HERNANDO FL 34442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SEIJAS, DAVID R ST P.O. BOX 187 LECANTO, FL 34460 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 725 E OVERDRIVE CIRCLE HERNANDO, FL 34442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SEIJAS JR., ERNEST J VP 4109 WEST PAPOOSE LANE BEVERLY HILLS, FL 34465 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 725 E OVERDRIVE CIRCLE HERNANDO, FL 34442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 affidavit with an address, with all other like empowered.	
SIGNATURE: 	Date: <b>April 23, 2007</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	