

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # N00000001477

1. Entity Name
STACY FOUNDATION BUILDING, INC.



Principal Place of Business
**5110 N. FEDERAL HWY.
FT. LAUDERDALE, FL 33308**

Mailing Address
**5110 N. FEDERAL HWY.
FT. LAUDERDALE, FL 33308**



01082008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1027392

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STPELTON, DOUGLAS A
5110 N. FEDERAL HWY.
STE. 100
FT. LAUDERDALE, FL 33308**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000855535
03/27/08-80053-022 61.25

10. OFFICERS AND DIRECTORS

TITLE D
NAME STELTON, DOUGLAS A
STREET ADDRESS 5110 N. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE D
NAME STELTON, BRETT S
STREET ADDRESS 5110 N. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE D
NAME STELTON, VIRLEE STACY
STREET ADDRESS 5110 N. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE D
NAME STELTON, SEAN D
STREET ADDRESS 5110 N. FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 617, 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 _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/08

Date

954-776-3386

Daytime Phone #