2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2007
Secretary of State

DOCUMENT# N01000007566

Entity Name: THE STORY BROTHERS, INC.

Current Principal Place of Business:

891 SE 130TH AVENUE
WEBSTER, FL 33597

New Principal Place of Business:

Current Mailing Address:

891 SE 130TH AVENUE
WEBSTER, FL 33597

New Mailing Address:

FEI Number: 37-1422509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STORY, RANDALL A
13028 C.R. 755
WEBSTER, FL 33597 US

Name and Address of New Registered Agent:

STORY, DANIEL A
929 S.E. 130TH AVE
WEBSTER, FL 33597 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: DANIEL A. STORY 02/06/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T,D ( ) Delete
Name: STORY, JANET C
Address: 891 S.E. 130TH AVE.
City-St-Zip: WEBSTER, FL 33597

Title: P,D ( ) Delete
Name: STORY, DANIEL A
Address: 929 S.E. 130TH AVE.
City-St-Zip: WEBSTER, FL 33597

Title: VP,D ( ) Delete
Name: STORY, RANDALL A
Address: 13028 C.R. 755
City-St-Zip: WEBSTER, FL 33597

Title: S,D ( ) Delete
Name: STORY, RANDALL A
Address: 13028 C.R. 755
City-St-Zip: WEBSTER, FL 33597

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL A .STORY P.D. 02/06/2007
Electronic Signature of Signing Officer or Director Date