

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 28, 2008 8:00 am**  
**Secretary of State**

01-28-2008 90039 031 \*\*\*\*61.25

**DOCUMENT # N04000000655**

1. Entity Name  
STONER FAMILY CHARITABLE FOUNDATION, INC.



Principal Place of Business  
700 CENTRAL AVE STE 301  
ST PETERSBURG, FL 33701

Mailing Address  
700 CENTRAL AVE STE 301  
ST PETERSBURG, FL 33701

40011138



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
20-0628337

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

STONER, JOHN R  
700 CENTRAL AVE STE 301  
ST PETERSBURG, FL 33701

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

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

(NOTE: Registered Agent signature required when reinstating)

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

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME STONER, JOHN R  
STREET ADDRESS 700 CENTRAL AVE STE 301  
CITY-ST-ZIP ST PETERSBURG, FL 33701

TITLE VP ☐ Delete  
NAME STONER, ROBERT W  
STREET ADDRESS 11005 CINDERLANE PLACE  
CITY-ST-ZIP SAINT PETERSBURG, FL 33702

TITLE ST ☐ Delete  
NAME ANNUNESTA, TRERESH S  
STREET ADDRESS 12006 MOUNT HATTAN DRIVE  
CITY-ST-ZIP TAMPA, FL 33626

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Director ☒ Change ☒ Addition  
NAME Robert W. Stoner  
STREET ADDRESS 700 Central Avenue #301  
CITY-ST-ZIP St. Petersburg FL 33701

TITLE Director ☒ Change ☒ Addition  
NAME Annunziata, Theresa  
STREET ADDRESS 700 Central Avenue #301  
CITY-ST-ZIP St. Petersburg FL 33701

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

Date

Daytime Phone #

1/22/08 727 8238331