

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

04-18-2006 90089 008 ****61.25

DOCUMENT # N05000004945

1. Entity Name

STONE STUDIO'S, INC.



Principal Place of Business

820 S PARK AVE SUITE S
WINTER GARDEN FL 34787

Mailing Address

820 S PARK AVE SUITE S
WINTER GARDEN FL 34787

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

20-2992204

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JAMES, JEREMY D
820 S PARK AVE SUITE S
WINTER GARDEN FL 34787

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 PD ☐ Delete
NAME JAMES, JEREMY D
STREET ADDRESS 820 S PARK AVE
CITY- ST- ZIP WINTER GARDEN FL 34787

TITLE VD ☐ Delete
NAME AUSTIN, TRAVIS
STREET ADDRESS 820 S PARK AVE
CITY- ST- ZIP WINTER GARDEN FL 34787

TITLE SD ☐ Delete
NAME JAMES, CLORETHA
STREET ADDRESS 820 S PARK AVE
CITY- ST- ZIP WINTER GARDEN FL 34787

TITLE TD ☐ Delete
NAME PRESLEY, SHEMONE
STREET ADDRESS 820 S PARK AVE
CITY- ST- ZIP WINTER GARDEN FL 34787

TITLE D ☐ Delete
NAME MITCHELL, WILLIEMAE
STREET ADDRESS 820 S PARK AVE
CITY- ST- ZIP WINTER GARDEN FL 34787

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition

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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 Section 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:

Willie Mae Mitchell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-06

Date

Daytime Phone #