## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000005362

TARVER, BRYANT

PALMETTO, FL 34221

704 14TH ST E

Name:

Address: City-St-Zip:

Entity Name: R.B. STUCCO SERVICES, INC

FILED May 04, 2007 Secretary of State

_many man	T.B. 010000 OERVIOLO, INC.			
Current P	rincipal Place of Business:	New Principal Place	of Business:	
704 14TH PALMETT	ST E O, FL 34221			
Current M	lailing Address:	New Mailing Address	New Mailing Address:	
704 14TH PALMETT	ST E O, FL 34221			
In accordan	: 65-0710954 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation di	•	Certificate of Status Desired ( )	
Name and	I Address of Current Registered Agent	: Name and Address o	f New Registered Agent:	
704 14TH	BERT SR. ST E O, FL 34221 US			
	e named entity submits this statement for the of Florida.	he purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT () Delete BING, ROBERT SR 704 14TH ST E PALMETTO, FL 34221	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DV () Delete BING, ROBERT JR 704 14TH ST E PALMETTO, FL 34221	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () Delete FELTON, JOHN 704 14TH ST E PALMETTO, FL 34221	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AD ( ) Delete JENKINS, EDWARD L 704 14TH ST E PALMETTO, FL 34221	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	AD ( ) Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT BING SR DPT 05/04/2007