

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064213

Entity Name: STONE SOURCE, INC.

FILED
Feb 23, 2007
Secretary of State

Current Principal Place of Business:

5405 TAYLOR ROAD
SUITE 14
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

5405 TAYLOR ROAD
SUITE 14
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-3660802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSZEWSKI, LAURA
5405 TAYLOR ROAD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

LAURA OLSZEWSKI & ASSOC, PA
5401 TAYLOR ROAD
SUITE 3
NAPLES, FL 34109 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: LAURA OLSZEWSKI

02/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: OLSZEWSKI, LAURA
Address: 5405 TAYLOR RD #14
City-St-Zip: NAPLES, FL 341091899 US

Title: PSD () Delete
Name: OLSZEWSKI, FRANK
Address: 5405 TAYLOR RD #14
City-St-Zip: NAPLES, FL 341091899 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: LAURA OLSZEWSKI

VT

02/23/2007

Electronic Signature of Signing Officer or Director

Date