

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079131

FILED
Feb 02, 2004
Secretary of State

Entity Name: STACEY'S OF SEFFNER, INC.

Current Principal Place of Business:

1790 MLK BLVD
SEFFNER, FL 33584

New Principal Place of Business:

790 MLK BLVD
SEFFNER, FL 33584

Current Mailing Address:

1451A N MISSOURI AVE
LARGO, FL 33770

New Mailing Address:

FEI Number: 59-3665911 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMARA, THOMAS P
2909 BAY TO BAY BLVD, STE 309
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DUFF, HOMER
Address: 1451A N MISSOURI AVE
City-St-Zip: LARGO, FL 33770

Title: V () Delete
Name: SPONG, LESLIE A
Address: 1451-A N. MISSOURI AVE.
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SPANG, LESLIE A
Address: 1451-A N. MISSOURI AVE.
City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LESLIE A. SPANG

VP

02/02/2004

Electronic Signature of Signing Officer or Director

Date