

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90111 046 ***150.00

DOCUMENT # P00000110545

1. Entity Name
STONE MANAGEMENT, INC.



Principal Place of Business
**635 S. ORANGE AVE
SUITE 10
SARASOTA FL 34236**

Mailing Address
**46 N. WASHINGTON BLVD.
#1
SARASOTA FL 34236**

2. Principal Place of Business
3600 TORREY PINES BLVD.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
SARASOTA, FLORIDA

City & State

Zip
34238-2827

Country
USA

Zip

Country

4. FEI Number **65-1068178**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATTERSON, JOHN
46 N. WASHINGTON BLVD.
SUITE 1
SARASOTA FL 34236**

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **PETRIK, GERO**
STREET ADDRESS **635 S ORANGE AVE, STE 10**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3600 TORREY PINES BLVD.**
CITY-ST-ZIP **SARASOTA, FLORIDA 34238-2827**

TITLE **VDST** ☐ Delete
NAME **NAKAMOTO, KERI**
STREET ADDRESS **635 S ORANGE AVENUE, SUITE 10**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3600 TORREY PINES BLVD.**
CITY-ST-ZIP **SARASOTA, FLORIDA 34238-2827**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Keri Nakamoto**

(941) 929-0152

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)