

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024598

FILED  
Jul 08, 2004  
Secretary of State

Entity Name: STUBBLEFIELD EQUIPMENT SERVICE, INC.

## Current Principal Place of Business:

8951 BONITA BEACH ROAD  
SUITE 525 BOX 315  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

8951 BONITA BEACH ROAD  
SUITE 525 BOX 315  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 59-3709285

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 CORAL WAY  
MIAMI, FL 33145 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: SPIEGEL & UTRERA, P.A.

07/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: STUBBLEFIELD, BRIAN  
Address: 8951 BONITA BEACH ROAD  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SVD ( ) Delete  
Name: STUBBLEFIELD, AMY  
Address: 8951 BONITA BEACH ROAD  
City-St-Zip: BONITA SPRINGS, FL 34135

## 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 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: AMY STUBBLEFIELD

SVD

07/08/2004

Electronic Signature of Signing Officer or Director

Date