## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000026369

Entity Name: STAYPUT SALES, INC.

FILED May 01, 2008 Secretary of State

Comment Britain at Black of Business		New Principal Place	New Principal Blood of Business		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ERSON DRIVE PALE, FL 3382				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
136 PATTERSON DRIVE AUBURNDALE, FL 33823			P.O. BOX 7305 WINTER HAVEN, FL	P.O. BOX 7305 WINTER HAVEN, FL 338837305	
FEI Number:	59-3702097	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	MAX P ERSON DRIVE PALE, FL 3382				
The above in the State		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	at receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () DUNCAN, MAX 136 PATTERSC AUBURNDALE,	N DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CDV () HAMMOND, JAN 1035 MEDINAH WINTER HAVEN	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	, ,	Delete	T:41		
Address: City-St-Zip:	DUNCAN, SAND 136 PATTERSC AUBURNDALE,	N DRIVE	Title: Name: Address: City-St-Zip:	()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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES S. HAMMOND CDV 05/01/2008