

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000067741

FILED  
Jan 12, 2011  
Secretary of State

Entity Name: STEBEN, INC.

**Current Principal Place of Business:**

9334 STATE ROAD 52  
HUDSON, FL 34669

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 144  
PORT RICHEY, FL 34673

**New Mailing Address:**

FEI Number: 59-3730907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GILMORE, DAVID C ESQ.  
7620 MASSACHUSETTS AVENUE  
NEW PORT RICHEY, FL 34653 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NAGEL, STEVEN H JR.  
Address: 27734 SORA BLVD.  
City-St-Zip: WESLEY CHAPPEL, FL 33544

Title: VP  
Name: NAGEL, JENNIFER L  
Address: 27734 SORA BLVD.  
City-St-Zip: WESLEY CHAPPEL, FL 33544

Title: SECY  
Name: NAGEL, JENNIFER L  
Address: 27734 SORA BLVD.  
City-St-Zip: WESLEY CHAPPEL, FL 33544

Title: TREA  
Name: NAGEL, STEVEN H JR  
Address: 27734 SORA BLVD.  
City-St-Zip: WESLEY CHAPPEL, FL 33544

Title: D  
Name: NAGEL, STEVEN H SR.  
Address: 1133 ROYAL TROON CT.  
City-St-Zip: TARPON SPRINGS, FL 34688

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER L. NAGEL

VP

01/12/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date