

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90229 027 ***150.00

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1. Entity Name
JAGUAR STUCCO, INC.



Principal Place of Business
**2545 DOBBS RD # 2
SAINT AUGUSTINE, FL 32086**

Mailing Address
**2739 ELSIE ROAD
ST. AUGUSTINE, FL 32086**

DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number
47-0869684

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROATH, DENNIS D
2739 ELSIE ROAD 390 Whisper Ridge Dr.
ST. AUGUSTINE, FL 32086 St. Augustine, FL 32092

**DO NOT WRITE
IN THIS SPACE**

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, 2006 Fee will be \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME **D**
ROATH, DENNIS D 390 Whisper Ridge Dr.
STREET ADDRESS **2739 ELSIE ROAD**
CITY- ST- ZIP **ST. AUGUSTINE, FL 32086** St. Augustine, FL 32092

TITLE
NAME **V**
ROATH, DARCEL C 390 Whisper Ridge Dr.
STREET ADDRESS **2739 ELSIE RD**
CITY- ST- ZIP **SAINT AUGUSTINE, FL 32086** St. Augustine, FL 32092

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CITY- ST- ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

DARCEL C. ROATH **DARCEL C. ROATH**

4-17-06 **904-824-0908**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #