

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000094324

FILED  
Mar 14, 2005  
Secretary of State

Entity Name: STONE DISTRIBUTORS OF CENTRAL FLORIDA, INC.

## Current Principal Place of Business:

620 S. HAWTHORNE AVE.  
APOPKA, FL 32703

## New Principal Place of Business:

## Current Mailing Address:

620 S. HAWTHORNE AVE.  
APOPKA, FL 32703

## New Mailing Address:

FEI Number: 51-0429438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERGUSON, PATTI  
25848 PINEHURST ST.  
SORRENTO, FL 32776 US

## Name and Address of New Registered Agent:

FERGUSON, PATTI  
25848 PINEHURST ST.  
SORRENTO, FL 32776 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: PATTI FERGUSON

03/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERGUSON, PATTI A  
Address: 25848 PINEHURST ST  
City-St-Zip: MY. PLYMOUTH, FL 32776

Title: VP ( ) Delete  
Name: FERGUSON, WALTER  
Address: 25848 PINEHURST ST.  
City-St-Zip: MT. PLYMOUTH, FL 32776

Title: S ( ) Delete  
Name: FERGUSON, AMY  
Address: 1260 WELCH RIDGE TERR.  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PATTI FERGUSON

P

03/14/2005

Electronic Signature of Signing Officer or Director

Date