2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001720

Entity Name: JOSHUA STUCCO, INC.

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3152 BOB SIKES ROAD

DEFUNIAK SPRINGS, FL 32433

2010 COUNTY HWY. 280 E.

DEFUNIAK SPRINGS, FL 32433

Current Mailing Address: New Mailing Address:

3152 BOB SIKES ROAD 2010 COUNTY HWY. 280 E. DEFUNIAK SPRINGS, FL 32433 DEFUNIAK SPRINGS, FL 32435

FEI Number: 16-1647210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SIMMONS, JOSHUA L
3152 BOB SIKES ROAD
2010 COUNTY HWY. 280 E.

DEFUNIAK SPRINGS, FL 32433 US DEFUNIAK SPRINGS, FL 32435 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: 04/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name:SIMMONS, JOSHUA LName:SIMMONS, JOSHUA LAddress:3152 BOB SIKES ROADAddress:2010 COUNTY HWY. 280 E.City-St-Zip:DEFUNIAK SPRINGS, FL 32433City-St-Zip:DEFUNIAK SPRINGS, FL 32435

Title: S (X) Delete Title: () Change () Addition

 Name:
 STOFILA, JEFFREY
 Name:

 Address:
 41 E TOLEDO AVE
 Address:

 City-St-Zip:
 DEFUNIAK SPRINGS, FL 32433
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 CATRELL, JOHNNY
 Name:

 Address:
 41 E TOLEDO AVE
 Address:

 City-St-Zip:
 DEFUNIAK SPRINGS, FL 32433
 City-St-Zip:

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: JOSHUA SIMMONS P 04/16/2008