

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2004 8:00 am
Secretary of State

07-14-2004 90004 034 ***158.75

DOCUMENT # P03000009536					
1. Entity Name STEALEY CONSTRUCTION, INC.					
Principal Place of Business 1885 ERVING CIRCLE, 8-103 OCOEE, FL 34761			Mailing Address 1885 ERVING CIRCLE, 8-103 OCOEE, FL 34761		
2. Principal Place of Business 3038 BARRYMORE CT. Suite, Apt. #, etc.		3. Mailing Address 3038 BARRYMORE CT. Suite, Apt. #, etc.			
City & State Orlando Florida		City & State Orlando Florida		4. FEI Number 08-0538577	
Zip 32835		Country ORANGE		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEALEY, RICHARD C 1885 ERVING CIRCLE, 8-103 OCOEE, FL 34761			7. Name and Address of New Registered Agent Name: STEALEY Richard C Street Address (P.O. Box Number is Not Acceptable): 3038 BARRYMORE CT City: Orlando FL Zip Code: 32835		
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: <u>Richard C Stealey</u> DATE: <u>7/11/04</u> <small>(NOTE: Registered Agent signature required when re-registering)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing <input type="checkbox"/> Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice:	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD STEALEY, RICHARD C 1885 ERVING CIRCLE, 8-103 OCOEE, FL 34761	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALL Positions STEALEY Richard C 3038 BARRYMORE CT. Orlando FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD QUIBELL, JOSEPH 6723 MILLAY ORLANDO, FL 32809	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Richard C Stealey</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date: <u>7/11/04</u> Daytime Phone #	