

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058671

Entity Name: BUCSSTUFF, INC.

FILED  
May 19, 2009  
Secretary of State

## Current Principal Place of Business:

7101 US HWY 19 NORTH  
PINELLAS PARK, FL 33781 US

## Current Mailing Address:

7101 US HWY 19 NORTH  
PINELLAS PARK, FL 33781 US

## New Principal Place of Business:

7101 US HWY 19 NORTH  
UNIT B  
PINELLAS PARK, FL 33781 US

## New Mailing Address:

7101 US HWY 19 NORTH  
UNIT B  
PINELLAS PARK, FL 33781 US

FEI Number: 59-3719104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOLFE, ROB  
7101 US HWY 19 NORTH  
PINEELAS PARK, FL 33781 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WOLFE, ROBERT M  
Address: 7101 US HWY 19 NORTH  
City-St-Zip: PINEELAS PARK, FL 33781

Title: S ( ) Delete  
Name: WOLFE, DONNA  
Address: 221 1ST STREET NE  
City-St-Zip: ST. PETE, FL 33701

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ROBERT M. WOLFE

P

05/19/2009

Electronic Signature of Signing Officer or Director

Date