## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000076670

Entity Name: STONED, INC

FILED Jul 13, 2005 Secretary of State

| -   | ,   |                               |  |  |  |
|---|---|-------------------------------|--|--|--|
| Current Principal Place of Business:          |   |                               | New Principal Place                          | New Principal Place of Business:             |  |
| 107 EAST END COURT<br>SANFORD, FL 32771       |   |                               |  | 32534 WOLF BRANCH LANE<br>SORRENTO, FL 32776 |  |
| Current Mailing Address:                      |   |                               | New Mailing Addres                           | New Mailing Address:                         |  |
| 107 EAST END COURT<br>SANFORD, FL 32771       |   |                               | 32534 WOLF BRANCH LANE<br>SORRENTO, FL 32776 |  |  |
| FEI Number                                    | : 75-3122696  | 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:    |  |  |
| 2516 GRE                                      | , PRESTON B<br>SHAM DRIVE<br>D, FL 32807                  | US                            |  |  |  |
|   | e named entity so<br>e of Florida.                        | ubmits this statement for the | purpose of changing its registere            | ed office or registered agent, or both,      |  |
| SIGNATU                                       | RE:   |                               |  |  |  |
|   | Electronic  | Signature of Registered Ag    | ent  | Date   |  |
| Election Ca                                   | mpaign Financing  | Trust Fund Contribution ( ).  |  |  |  |
| OFFICERS AND DIRECTORS:                       |   |                               | ADDITIONS/CHANG                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P ()[<br>SHARPE, VERNA<br>107 EAST END C<br>SANFORD, FL 3 | COURT                         | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VP ()[<br>LAMBERSON, C<br>107 EAST END C<br>SANFORD, FL 3 | COURT                         | Title:<br>Name:<br>Address:<br>City-St-Zip:  | () Change () Addition                        |  |

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: VERNA S SHARPE P 07/13/2005