

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106115

Entity Name: CENTERSTAGE PRO, INC.

FILED  
Apr 19, 2011  
Secretary of State

**Current Principal Place of Business:**

505 TUPELO TRACE  
SAINT JOHNS, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

505 TUPELO TRACE  
SAINT JOHNS, FL 32259

**New Mailing Address:**

FEI Number: 20-0279456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEPHENSON, DALE  
505 TUPELO TRACE  
SAINT JOHNS, FL 32259 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STEPHENSON, DALE  
Address: 505 TUPELO TRACE  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D  
Name: STEPHENSON, KAREN  
Address: 505 TUPELO TRACE  
City-St-Zip: JACKSONVILLE, FL 32259

I hereby 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 all other like empowered.

SIGNATURE: DALE STEPHENSON

PRES

04/19/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date