


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000114040**  
 1. Entity Name  
**SARASOTA STAIR, INC.**



Principal Place of Business  
**1752 APEX ROAD  
 UNIT C  
 SARASOTA, FL 34240**

Mailing Address  
**6406 WHITE SANDS TERRACE  
 SARASOTA, FL 34231**



01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0303234</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

8. Name and Address of Current Registered Agent

**STABLER, MICHAEL W  
 6406 WHITE SANDS TERRACE  
 SARASOTA, FL 34231**

**DO NOT WRITE IN THIS SPACE**

9. 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 \_\_\_\_\_ DATE \_\_\_\_\_

*(NOTE: Registered Agent signature required when reinstating)*

U00000380970  
 01/11/06-80035-006 150.00

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS STABLER, MICHAEL W 6406 WHITE SANDS TERRACE SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYES, LARRY 2136 WISTERIA STREET SARASOTA, FL 34239
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Michael Stabler* **PRESIDENT MICHAEL STABLER** 1/6/06 941-379-6222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #