

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000121410

1. Entity Name
CAMPBELL'S STUCCO & STONE, INC.



Principal Place of Business
9461 SHAVER DRIVE
BROOKSVILLE, FL 34601

Mailing Address
9461 SHAVER DRIVE
BROOKSVILLE, FL 34601



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number
54-2141848

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VRASPIR, TODD W
5327 COMMERCIAL WAY
SUITE A101
SPRING HILL, FL 34606

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CAMPBELL, JAMES T
STREET ADDRESS	9461 SHAVER DRIVE
CITY-ST-ZIP	BROOKSVILLE, FL 34601
TITLE	S,T
NAME	CAMPBELL, JAMES T
STREET ADDRESS	9461 SHAVER DRIVE
CITY-ST-ZIP	BROOKSVILLE, FL 34601
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UN00000390952
01/24/06-80017-011 9.75
UN00000390952
01/24/06-80017-010 150.00

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 807, 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: *x James T Campbell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-06 1-352-786-04
Date Daytime Phone