

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000125910 1. Entity Name AUSTIN STUCCO & STONE, INC.	
--	---

Principal Place of Business 1534 MEADOWLARK RD SPRING HILL, FL 34608	Mailing Address 1534 MEADOWLARK RD SPRING HILL, FL 34608
--	--

DO NOT WRITE IN THIS SPACE



02282006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2286020	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**AUSTIN, CHERYL
1534 MEADOWLARK RD
SPRING HILL, FL 34608**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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	000000493534 04/20/06-80008-011 158.75
---	---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT AUSTIN, RICHARD S 1534 MEADOWLARK RD SPRING HILL, FL 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AUSTIN, CHERYL L 1534 MEADOWLARK RD SPRING HILL, FL 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: *Richard S. Austin* **President** **3-25-06** **352-666-9673**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #