

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000126822

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: STONEY ISLAND INVESTMENTS, INC.

## Current Principal Place of Business:

6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

10175 FORTUNE PARKWAY SUITE 1201  
JACKSONVILLE, FL 32256

## Current Mailing Address:

6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
JACKSONVILLE, FL 32216

## New Mailing Address:

10175 FORTUNE PARKWAY SUITE 1201  
JACKSONVILLE, FL 32256

FEI Number: 90-0121416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANKERS, GUS  
6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

SANKERS, GUS  
10175 FORTUNE PARKWAY SUITE 1201  
JACKSONVILLE, FL 32256 US

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:

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FRANSEN, VICTOR R  
Address: 8221 OLD COURTHOUSE ROAD SUITE 204  
City-St-Zip: VIENNA, VA 22182

Title: VD ( ) Delete  
Name: SANKERS, GUS  
Address: 6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FRANSEN, VICTOR R  
Address: 8000 TOWERS CRESCENT DR. #825  
City-St-Zip: VIENNA, VA 22182

Title: VD (X) Change ( ) Addition  
Name: SANKERS, GUS  
Address: 10175 FORTUNE PARKWAY SUITE 1201  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: GUS SANKERS

VD

02/24/2009

Electronic Signature of Signing Officer or Director

Date