

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90034 019 ***150.00

DOCUMENT # P03000138321 1. Entity Name GIANT SAND & STONE, INC.					
Principal Place of Business 3706 MERCANTILE AVENUE NAPLES, FL 34104 US				Mailing Address 3706 MERCANTILE AVENUE NAPLES, FL 34104 US	
2. Principal Place of Business - No P.O. Box # 3600 PROSPECT AVE.		3. Mailing Address P.O. Box 11823			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		01142008 Chg-P CR2E034 (12/06)	
City & State NAPLES FL.		City & State NAPLES FL.		4. FEI Number 20-0414022	
Zip 34104		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip 34101		Country USA		6. Name and Address of Current Registered Agent LAMB, JEFFREY R 809 WALKERBILT ROAD 5 NAPLES, FL 34110	
7. Name and Address of New Registered Agent Tax Accounting & Financial Assoc.		Street Address (P.O. Box Number is Not Acceptable) 809 Walkerbilt Rd. #5			
City Naples		State FL		Zip Code 34110	
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 Benjamin Cottrell 3/12/08					
9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD REDDISH, PAUL 3706 MERCANTILE AVENUE NAPLES, FL 34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	REDDISH, PAUL P. 3600 PROSPECT AVE. NAPLES FL. 34104	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP MALONEY, TIMOTHY 3706 MERCANTILE AVENUE NAPLES, FL 34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MALONEY, Timothy V.P. 3600 PROSPECT AVE. NAPLES FL. 34104	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T JOHN, POZATEK 3706 MERCANTILE AVENUE NAPLES, FL 34108	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
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 the like empowered.					
SIGNATURE:			3-10-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					