2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000047124

Entity Name: DICK STANLEY CONSTRUCTION INC.

FILED Jan 14, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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104 E SANDERS ST HOSFORD, FL 32334 15797 NE SANDERS STREET HOSFORD, FL 32334

Current Mailing Address: New Mailing Address:

PO BOX 231 HOSFORD, FL 32334

FEI Number: 84-1645063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STANLEY, DICK

104 E SANDERS ST
HOSFORD, FL 32334 US

STANLEY, DICK
15797 NE SANDERS STREET
HOSFORD, FL 32334 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: 01/14/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:STANLEY, DICKName:STANLEY, DICKAddress:104 E SANDERS STAddress:15797 NE SANDERS STREET

City-St-Zip: HOSFORD, FL 32334 Address: 15/97 NE SANDERS 51 REE1

City-St-Zip: HOSFORD, FL 32334

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name:STANLEY, DANIELName:STANLEY, DANIELAddress:104 E SANDERS STAddress:15797 NE SANDERS STREET

Address: 104 E SANDERS ST Address: 15797 NE SANDERS STREET
City-St-Zip: HOSFORD, FL 32334 City-St-Zip: HOSFORD, FL 32334

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

Name: MAYO, MARY L Name: MAYO, MARY L

 Address:
 104 E SANDERS ST
 Address:
 15797 NE SANDERS STREET

 City-St-Zip:
 HOSFORD, FL 32334
 City-St-Zip:
 HOSFORD, FL 32334

I hereby certify that the information supplied with this filing does not qualify for the 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: DICK STANLEY P 01/14/2007