2006 FOR PROFIT CORPORATION

Sep 11, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P04000069265 09-11-2006 90006 024 ***150.00 STONEPARK CONSTRUCTION, INC. Principal Place of Business Mailing Address 8975 130TH AVE N 8975 130TH AVE N LARGO, FL 33773-1402 US LARGO, FL 33773-1402 US 2. Principal Place of Business 161 SIERRA CIRCLE 3. Mailing Address 1611 SIERRA Suite, Apt. #, etc. Suite, Apt. #, etc 06022006 CR2E034 (11/05) City & State City & State 4. FE! Number Applied For 20-1057948 Not Applicable 33764 Country S \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent " **TUTTLE, EDWARD S** 1611 SiGTA C:T Street Address (P.O. Box Number is Not Acceptable) 355-SHIRLEY AVE BELLAIRE, FL 39756-1080 Clearwater, FL 33764 City Zip Code 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, typed or printe (NOTE, Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Due by September 6, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TM F Change ☐ Addition TUTTLE, EDWARD S NAME NAME STREET ADDRESS 355 SHIRLEY AVE. STREET ADDRESS CITY-ST-ZIP BELLAIRE, FL 337731402 CITY-ST-ZIP TITLE Tottle, EDWARD S ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CHY-ST-ZIP TITLE ☐ Delete THE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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, withhall other like empowered.

SIGNATURE:

7:

FILED