

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000152413

Entity Name: STALNAKER CLEANUP, INC.

FILED  
May 16, 2007  
Secretary of State

## Current Principal Place of Business:

449 CLARK STREET  
NORTH FORT MYERS, FL 33903 US

## New Principal Place of Business:

## Current Mailing Address:

449 CLARK STREET  
NORTH FORT MYERS, FL 33903 US

## New Mailing Address:

FEI Number: 54-2181485

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STALNAKER, ROBERT T  
449 CLARK STREET  
NORTH FT. MYERS, FL 33903 US

## Name and Address of New Registered Agent:

ALL FLORIDA FIRM  
465 S VLOUSIA AV  
SUITE C  
ORANGE CITY, FL 32763 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: JAMISON MARK JESSUP SR

05/16/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: STALNAKER, ROBERT T  
Address: 449 CLARK STREET  
City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title: V ( ) Delete  
Name: STAKNAKER, EVA  
Address: 449 CLARK STREET  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T ( ) Delete  
Name: JENKINS, DENNYEILL  
Address: 447 CLARK STREET  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT STALNAKER

P,D

05/16/2007

Electronic Signature of Signing Officer or Director

Date