2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 10, 2009
Secretary of State

DOCUMENT# P05000014582

Entity Name: GARROD STUCCO, INC.

Current Principal Place of Business:

4271 JAMES ST
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 494410
PORT CHARLOTTE, FL 33949

New Mailing Address:

FEI Number: 20-2241711 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOTITZKY, EDWARD L
223 TAYLOR STREET
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: BIFARETTI, CLAUDIO R
Address: 25149 DERRINGER ROAD
City-St-Zip: PUNTA GORDA, FL 33983

Title: VPS (X) Delete
Name: GARROD, BRENT A
Address: 3289 SW WILDCAT RUN ROAD
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change ( ) Addition
Name: BIFARETTI, CLAUDIO R
Address: PO BOX
City-St-Zip: PORT CHARLOTTE, FL 33949

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: CLAUDIO BIFARETTI PVTS 07/10/2009

Electronic Signature of Signing Officer or Director Date