2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062073

Entity Name: BOB STILES & SONS, INC.

FILED Apr 28, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

9900 W SAMPLE RD 9900 W SAMPLE RD **SUITE #300** 3RD FL

POMPANO BEACH, FL 33065 CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

9900 W SAMPLE RD 9900 W SAMPLE RD 3RD FL **SUITE #300**

POMPANO BEACH, FL 33065 CORAL SPRINGS, FL 33065

FEI Number: 20-2759880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STILES, BOB STILES, ROBERT J 9900 W SAMPLE RD 9900 W SAMPLE RD 3RD FL SUITE # 300

POMPANO BEACH, FL 33065 US CORAL SPRINGS, FL 33065 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: ROBERT J. STILES 04/28/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

STILES, ROBERT STILES, ROBERT J Name: Name: 3300 W SAMPLE RD 3RD FL 3300 W SAMPLE RD SUITE # 300 Address: Address:

City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: Title: () Delete (X) Change () Addition Name: STILES, GAVIN Name: STILES, GAVIN

3300 W SAMPLE RD 3RD FL 3300 W SAMPLE RD SUITE 300 Address: Address: POMPANO BEACH, FL 33065 CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition D () Delete

STILES, DARON Name: STILES, DARON Name:

3300 W SAMPLE RD 3RD FL 3300 W SAMPLE RD SUITE # 300 Address: Address: City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

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.

Ρ SIGNATURE: ROBERT J. STILES 04/28/2007