

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075879

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: STEPHEN THORNE PLASTERING, INC.

**Current Principal Place of Business:**

2927 SW BUTTERFLY LN.  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

2927 SW BUTTERFLY LN.  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 52-1083669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THORNE, STEPHEN  
2927 SW BUTTERFLY LN.  
PALM CITY, FL 34990 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: THORNE, STEPHEN  
Address: 2927 SW BUTTERFLY LN.  
City-St-Zip: PALM CITY, FL 34990

Title: VP ( ) Delete  
Name: SHWARTZ, RON  
Address: 2927 SW BUTTERFLY LN.  
City-St-Zip: PALM CITY, FL 34990

Title: SEC ( ) Delete  
Name: STEPHENSON, GLADSTONE  
Address: 2250 CARNATION ROAD  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: TREA ( ) Delete  
Name: EDWARDS, DEVYN J  
Address: 13028 SE HOBE HILLS DRIVE  
City-St-Zip: HOBE SOUND, FL 33455

**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:

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: STEPHEN E. THORNE

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date