

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087414

Entity Name: FRANCISCO STUCCO, INC.

FILED  
Feb 28, 2006  
Secretary of State

**Current Principal Place of Business:**

38 BEECH ST.  
FREEPORT, FL 32439

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2490  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 20-3210412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COFFIELD SACHS, COLLEEN  
1719 S. COUNTY HIGHWAY 393  
SANTA ROSA BEACH, FL 32459 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: DIR ( ) Delete  
Name: GUEVARA, FRANCISCO  
Address: 38 BEECH ST.  
City-St-Zip: FREEPORT, FL 32439

Title: S ( ) Delete  
Name: ROSAS, ONOFRE  
Address: 523 UNION ST., LOT #15A  
City-St-Zip: FT. WALTON BEACH, FL 325471160

Title: T ( ) Delete  
Name: GUEVARA, WILFREDO  
Address: 100 8TH AVE APT 28  
City-St-Zip: SHALIMAR, FL 32579

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S (X) Change ( ) Addition  
Name: ORDONEZ, JOSE I  
Address: 303 SOUTH AVE , APT #30  
City-St-Zip: FT. WALTON BEACH, FL 32547

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCISCO GUEVARA

DIR

02/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date