

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119959

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: STEPHENSON CONTRACTING SPECIALTIES, INC.

## Current Principal Place of Business:

1551 RUSSELL RD  
GREEN COVE SPRINGS, FL 32043

## New Principal Place of Business:

569 EDENFIELD RD  
GREEN COVE SPRINGS, FL 32043

## Current Mailing Address:

1551 RUSSELL RD  
GREEN COVE SPRINGS, FL 32043

## New Mailing Address:

569 EDENFIELD RD  
GREEN COVE SPRINGS, FL 32043

FEI Number: 20-3374686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEPHENSON, JEREMY  
1551 RUSSELL RD  
GREEN COVE SPRINGS, FL 32043 US

## Name and Address of New Registered Agent:

STEPHENSON, JEREMY  
569 EDENFIELD RD  
GREEN COVE SPRINGS, FL 32043 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: JEREMY STEPHENSON

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STEPHENSON, JEREMY  
Address: 1551 RUSSELL RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D ( ) Delete  
Name: STEPHENSON, ANDREW H  
Address: 1551 RUSSELL RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: STEPHENSON, JEREMY  
Address: 569 EDENFIELD RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: JEREMY STEPHENSON

OFFI

04/27/2007

Electronic Signature of Signing Officer or Director

Date