

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # P06000001881	
1. Entity Name STROUD MACHINERY REPAIR, INC.	

Principal Place of Business 32851 HIDEAWAY LANE DADE CITY, FL 33525 US	Mailing Address 32851 HIDEAWAY LANE DADE CITY, FL 33525 US
--	--



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4071352	Applied For ☐ Not Applicable
------------------------------------	--

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent STROUD, NANCY 32851 HIDEAWAY LANE DADE CITY, FL 33525

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Nancy Stroud* (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STROUD, BRIAN 32851 HIDEAWAY LANE DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T STROUD, NANCY 32851 HIDEAWAY LANE DADE CITY, FL 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000792674
01/24/08-80015-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

Nancy Stroud