

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155321

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: EXPERIENCED STONE INSTALLATION, INC.

## Current Principal Place of Business:

248 COSTADO ST.  
ST. AUGUSTINE, FL 32080 US

## New Principal Place of Business:

248 COSTADO ST.  
ST. AUGUSTINE, FL 32086 US

## Current Mailing Address:

248 COSTADO ST.  
ST. AUGUSTINE, FL 32080 US

## New Mailing Address:

248 COSTADO ST.  
ST. AUGUSTINE, FL 32086 US

FEI Number: 20-8079297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAY, WILLARD  
85 HANNAH COLE DR.  
ST. AUGUSTINE, FL 32080 US

## Name and Address of New Registered Agent:

DAY, WILLARD  
248 COSTADO ST.  
ST. AUGUSTINE, FL 32086 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: DAY, WILLARD  
Address: 85 HANNAH COLE DR.  
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: D ( ) Delete  
Name: DAY, WILLARD  
Address: 85 HANNAH COLE DR.  
City-St-Zip: ST. AUGUSTINE, FL 32080 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: DAY, WILLARD  
Address: 248 COSTADO ST.  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: D (X) Change ( ) Addition  
Name: DAY, WILLARD  
Address: 248 COSTADO ST.  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

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: WILLARD DAY

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date