


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 10, 2008 8:00 am**  
**Secretary of State**


07-10-2008 90016 038 \*\*\*150.00

<b>DOCUMENT # P07000013048</b>	
1. Entity Name <b>CHRISTMAS STUCCO INC</b>	

Principal Place of Business <b>321 21ST NW NAPLES, FL 34120</b>	Mailing Address <b>321 21ST NW NAPLES, FL 34120</b>
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

**40110173**



06232008 Chg-P CR2E034 (12/06)

4. FEI Number <b>20-8355546</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent <b>CHRISTMAS, JOHN 321 21ST NW NAPLES, FL 34120</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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: *John Christmas* (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTMAS, JOHN 321 21ST NW NAPLES, FL 34120 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHRISTMAS, CONNIE 321 21ST NW NAPLES, FL 34120 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR CHRISTMAS, TANYA 321 21ST NW NAPLES, FL 34120 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John Christmas* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/08 239/784/8749 Date Daytime Phone #

ATTACHMENT

40110173

CHRISTMAS STUCCO INC

332 21<sup>ST</sup> ST NW

NAPLES, FL 34120

CELL# 239-784-8749 FAX# 877-353-4719

# P07000013048

July 7<sup>th</sup> 2008

Florida Department of State  
Division of Corporations  
P o box 6327  
Tallahassee, FL 32314

Dear Sir/Madam:

RE: TAX ID#20-8355546 /P07000013048

Please find enclose the original annual report which was omitted from the letter originally sent to you. I did not receive the annual post card from sent to me. Hence I am asking for a waiver of the penalty of the fee of \$550.00.

Please find enclosed a check in the sum of \$150.00 check number #1144 for the reinstatement of the above Corporation.

If any further information is required please do not hesitate to contact us on the above telephone number

Yours truly

*John Christmas*

JOHN CHRISTMAS  
PRESIDENT

ENC.