## 2008 FOR PROFIT CORPORATION

## Jan 22, 2008 8:00 am Secretary of State ANNUAL REPORT 01-22-2008 90057 032 \*\*\*150.00 DOCUMENT # P07000014021 1. Entity Name STERN & STERN ASSOCIATES, INC. 40007043 Principal Place of Business Mailing Address 24 POINCIANA WAY 24 POINCIANA WAY PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142008 CR2E034 (12/06) 120-8392479 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STERN, STEVEN A Street Address (P.O. Box Number is Not Acceptable) 24 POINCIANA WAY PONTE VEDRA BEACH, FL 32082 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PΠ THILE ☐ Delete TITLE ☐ Change Addition STERN, STEVEN A NAME NAME 24 POINCIANA WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 CITY-SI-ZIP **VPST** TITLE ☐ Delete HILE ☐ Change ☐ Addition STERN, HELENA K NAME NAME STREET ADDRESS 24 POINCIANA WAY STREET ADDRESS PONTE VEDRA BEACH, FL 32082 CITY-ST-7P CITY-SI-7P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP ☐ Delete THE THEF ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CJ1Y-S1-7IP CHTY-ST ZIP

12. Thereby 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 chapted or on an attachment with an arriver with all intermited the empowered. changed, or on an attachme

STREET ADDRESS

CITY-SI-ZIP

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

STEVEN A. STERN

☐ Delete

☐ Change

Addition

FILED