

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000118883

**FILED**  
**Mar 27, 2008**  
**Secretary of State**

**Entity Name:** STANFIELD INVESTMENTS, INC.

**Current Principal Place of Business:**

109 MORNING GLORY LANE  
INTERLACHEN, FL 32148

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1802  
INTERLACHEN, FL 32148

**New Mailing Address:**

**FEI Number:** 26-1334023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STANFIELD, GARY L  
109 MORNING GLORY LANE  
INTERLACHEN, FL 32148 US

**Name and Address of New Registered Agent:**

STANFIELD, GARY L PRES.  
109 MORNING GLORY LANE  
INTERLACHEN, FL 32148 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: GARY L. STANFIELD

03/27/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: STANFIELD, GARY L  
Address: P.O. BOX 1802  
City-St-Zip: INTERLACHEN, FL 32148

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: GARY L. STANFIELD

PRES

03/27/2008

Electronic Signature of Signing Officer or Director

Date