2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2011
Secretary of State

DOCUMENT# P09744

Entity Name: STANLEY CONSULTANTS, INC.

Current Principal Place of Business:

225 IOWA AVENUE
MUSCATINE, IA 52761

New Principal Place of Business:

Current Mailing Address:

225 IOWA AVENUE
MUSCATINE, IA 52761

New Mailing Address:

FEI Number: 42-1320758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ROBERTS, GAYLE A PD
Address: 6914 NOTTINGHAM
City-St-Zip: BETTENDORF, IA 52722

Title: SVP
Name: REISCHAUER, BENNETT D SVP
Address: 1610 MULBERRY AVE.
City-St-Zip: MUSCATINE, IA 52761

Title: CD
Name: THOMOPULOS, GREGS G CD
Address: 75 SHAGBARK CT
City-St-Zip: IOWA CITY, IA 52246

Title: S
Name: ELLIOTT, NANCY D S
Address: 209 NORMANDY CT.
City-St-Zip: MUSCATINE, IA 52761

Title: T
Name: SMITH, RICHARD C T
Address: 101 STERLING WOODS CT
City-St-Zip: MUSCATINE, IA 52761

Title: AS
Name: MCDANIEL, KAREN L
Address: 702 BARRY AVENUE
City-St-Zip: MUSCATINE, IA 52761

I hereby 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 all other like empowered.

SIGNATURE: KAREN L. MCDANIEL AS 01/06/2011

Electronic Signature of Signing Officer or Director Date