

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000056399

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** STEPHANIE OVERSTREET, INC.

**Current Principal Place of Business:**

348 MIRACLE STRIP PARKWAY SW  
SUITE 6  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

348 MIRACLE STRIP PARKWAY SW  
SUITE 6  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number:** 27-3007349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OVERSTREET, STEPHANIE C  
2895 2ND AVENUE NE  
CRESTVIEW, FL 32539 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: P  
Name: OVERSTREET, STEPHANIE C  
Address: 348 MIRACLE STRIP PARKWAY SW  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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: STEPHANIE OVERSTREET

P

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date