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FILED
Feb 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11206 (0)
1. Corporation Name
STANLEY CONSULTANTS OF FLORIDA, INC.



Principal Place of Business

Mailing Address

225 IOWA AVENUE
STANLEY BUILDING
MUSCATINE IA 52761

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STANLEY BUILDING
MUSCATINE IA 52761

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1986

4. FEI Number

42-1281922

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
STANLEY, RICHARD H.
STREET ADDRESS 001 W THIRD ST
CITY-ST-ZIP MUSCATINE IA

TITLE ☐ DELETE

NAME P
GROUNDS, DAVID
STREET ADDRESS 523 SANDY CREEK DR
CITY-ST-ZIP BRANDON FL

TITLE ☐ DELETE

NAME S
KEANE, KATHLEEN A.
STREET ADDRESS 327 W 2 STR
CITY-ST-ZIP MUSCATINE IA

TITLE ☐ DELETE

NAME T
SMITH, RICHARD C.
STREET ADDRESS 101 STERLING WOODS CT
CITY-ST-ZIP MUSCATINE IA

TITLE ☐ DELETE

NAME CD
THOMOPULOS, GREGS G.
STREET ADDRESS 1002 ESTRON STREET
CITY-ST-ZIP IOWA CITY IA

TITLE ☐ DELETE

NAME AT
ALLCHIN, STEVEN J.
STREET ADDRESS 2861 ROLLING MEADOWS LN
CITY-ST-ZIP MUSCATINE IA

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

4/22/98 2:16 PM 1238

CR2E034 (10/97)