2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2008 8:00 am Secretary of State 02-19-2008 90014 013 ***150.00

DOCUMENT # P92000012107 1. Entity Name AL STEVENSON BUILDINGS, INC.				02-19-2008 90014 013 ***150.00	
Principal Place of Business		Mailing Address		40027364	
6803 8TH AVE WEST BRADENTON, FL 34209		6803 8TH AVE WEST BRADENTON, FL 34209)		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02142008 Chg-P CR2E034 (12/06)	
City & State		City & State		4. FEI Number Applied For 38-1779156 Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curren	Registered Agent	Name MAT	7. Name and Address of New Registered Agent	
STEVENS	STEVENSON ALLAND			RILYN B. STEVENSON	
STEVENSON, ALLAN J 6803 8TH AVE WEST			Street Addres	s (P.O. Box Number is Not Acceptable)	
BRADENTON, FL 34209			680	6803 8TH AVE WEST	
			DDADTHEON		
<u> </u>		City BR	ADENTON FL Zip Code 34209		
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.		bution. A	55.00 May Be dded to Fees	
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVENSON, ALLAN J 6803 8TH AVE WEST BRADENTON, FL 34209	Celeie	TITLE NAME STREET ADDRESS CITY-SI-ZIP	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-S1-ZIP	D STEVENSON, MARILYN B 6803 8TH AVE WEST BRADENTON, FL 34209	☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVENSON, GRANT J 9080 SADDLECREEK DR BOCA RATON, FL 33496	☐ Delete	TITLE NAME STHEET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYSON, SALLY K 213 73RD STREET N.W. BRADENTON, FL 34209	☐ Delete	ITILE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TRLE: NAME SIREET ADDRESS CHY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
indicated	on this report or supplemental report.	is true and accurate and that m	y signature chall have th	ned in Chapter 119, Florida Statutes. I further certify that the information ne same legal effect as if made under oath; that I am an officer or director 507, Florida Statutes: and that my name appears in Block 10 or Block 11 if	

owered.

MIN Sirictor Tubulary 14, 2008 (941) 795-045

OFFICER OR DIRECTOR

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