

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037552

FILED  
Jan 07, 2004  
Secretary of State

Entity Name: STEVENS LABORATORIES, INC.

## Current Principal Place of Business:

3749 SW 42 AVE  
#3  
GAINESVILLE, FL 32608

## New Principal Place of Business:

## Current Mailing Address:

7827 SW 43 DR  
GAINESVILLE, FL 32608

## New Mailing Address:

FEI Number: 59-3188163      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEVENS, CAROL J  
7827 SW 43 DR  
GAINESVILLE, FL 32608      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STEVENS, ROBERT C  
Address: 7827 SW 43 DR  
City-St-Zip: GAINESVILLE, FL 32608

Title: S ( ) Delete  
Name: STEVENS, ROBERT C  
Address: 7827 SW 43 DR  
City-St-Zip: GAINESVILLE, FL 32608

Title: ST ( ) Delete  
Name: STEVENS, CAROL J  
Address: 7827 SW 42 DR  
City-St-Zip: GAINESVILLE, FL 32608

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STEVENS, CAROL J PD  
Address: 7827 SW 43 DR  
City-St-Zip: GAINESVILLE, FL 32608

Title: VP (X) Change ( ) Addition  
Name: STEVENS, ROBERT R VP  
Address: 13935 CARTEE ROAD  
City-St-Zip: MIAMI, FL 33158

Title: ST (X) Change ( ) Addition  
Name: BENNETTE, JOEL R S,T  
Address: 21131 NE 68 LN  
City-St-Zip: WILLISTON, FL 32696

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL J. STEVENS

PD

01/07/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date