

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037552

FILED
Jan 19, 2005
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:

7827 SW 43 DR
GAINESVILLE, FL 32608

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, CAROL J PD
Address: 7827 SW 43 DR
City-St-Zip: GAINESVILLE, FL 32608

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: BENNETTE, JOEL R S,T
Address: 7847 SW 43 DR
City-St-Zip: GAINESVILLE, FL 32608

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

01/19/2005

Electronic Signature of Signing Officer or Director

Date