2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000058140

Entity Name: STP OF LAKE WALES, INC.

LAKE WALES, FL 33853

City-St-Zip:

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 712 N. SCENIC HWY LAKE WALES, FL 33853 **Current Mailing Address: New Mailing Address:** 712 N. SCENIC HWY LAKE WALES, FL 33853 FEI Number: 59-3260604 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRIFFIN, ANITA 712 N. SCENIC HWY LAKE WALES, FL 33853 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES () Delete Title: () Change () Addition Name: GRIFFIN, ANITA Name: 712 N. SCENIC HWY Address: Address: City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: () Delete Title: VPRE Title: () Change () Addition Name: GOINS, EMALIE Name: 712 N. SCENIC HWY Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANITA GRIFFIN PRES 01/11/2007