


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008 08:00 A
Secretary of State

DOCUMENT # P95000000264 1. Entity Name STAPLES INVESTMENT PARTNERS, INC.	
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Principal Place of Business 1122 PARK STREET ST. PETERSBURG, FL 33710	Mailing Address 7005 CENTRAL AVE. ST. PETERSBURG, FL 33710 US
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DO NOT WRITE IN THIS SPACE

01102008 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-3289602	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARSENAULT, KENNETH G JR
 10225 ULMERTON ROAD
 SUITE 2
 LARGO, FL 34641

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STAPLES, JACK R 1122 PARK STREET ST. PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MEDLEY, EDWARD 4300 45TH STREET SOUTH ST. PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS CANNOVA, MICHAEL F 200 MADONNA BLVD. TIERRA VERDE, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STAPLES, JUDIE C 1122 PARK STREET ST. PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

U00000787005
01/17/08-80063-020 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Jack Staples Date: 1-15-08 Daytime Phone #: 727-432-9767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR