2007 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000000710

Attn Cathy Directors Office

Dept of State
409 East Gaines St.
Tallahassee, Fl 32399
Attn: Annual Report Section

FILED
07 MAY 23 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
R.L. STACY CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
2830 S.E. 31ST ST. OCALA FL 34471	2830 S.E. 31ST ST. OCALA FL 34471

2. Principal Place of Business		3. Mailing Address	
Suite, Apt # etc		Suite Apt #, etc	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3285164 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STACY, RALPH L
2830 S.E. 31ST ST.
OCALA FL 34471

7. Name and Address of New Registered Agent

Name
Street Address (P O Box Number is Not Acceptable)
City FL Zip Code

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

SIGNATURE ____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

May 1, 2007

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
~~After May 1, 2002 Fee will be $550.00~~
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	STACY, RALPH L	
STREET ADDRESS	2830 SE 31ST ST	
CITY-ST-ZIP	OCALA FL 34471	
TITLE	TS	☐ Delete
NAME	STACY, NANCY	
STREET ADDRESS	2830 SE 31ST ST	
CITY-ST-ZIP	OCALA FL 34471	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

000103903260
06/05/07--01027--014 **150.00

Did not receive bill?? Paymt made to this Corp.

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy Stacy Nancy Stacy 11/30/02 ~~352-694-3088~~
Nancy Stacy Nancy Stacy 4/29/07 352-694-3055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #