

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000065445

FILED
May 09, 2006
Secretary of State

Entity Name: LINDA D. STEWART ENTERPRISES, INC.

Current Principal Place of Business:

52 PONCE DE LEON DR
ORMOND BEACH, FL 32176

New Principal Place of Business:

345 DAYTONA AVE
HOLLY HILL, FL 32117

Current Mailing Address:

52 PONCE DE LEON DR
ORMOND BEACH, FL 32176

New Mailing Address:

345 DAYTONA AVE
HOLLY HILL, FL 32117

FEI Number: 59-3332793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, LINDA D
52 PONCE DE LEON DR
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

STEWART, LINDA D
345 DAYTONA AVE
HOLLY HILL, FL 32117 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: LINDA D. STEWART

05/09/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: STARKE, ROXANNE
Address: 52 PONCE DE LEON DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: P () Delete
Name: STEWART, LINDA D
Address: 52 PONCE DE LEON DR
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: STARKE, ROXANNE
Address: 345 DAYTONA AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: P (X) Change () Addition
Name: STEWART, LINDA D
Address: 345 DAYTONA AVE
City-St-Zip: HOLLY HILL, FL 32117

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: ROXANNE M. STARKE

S

05/09/2006

Electronic Signature of Signing Officer or Director

Date