


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000032795	
1. Entity Name MEYERS-STERNER INDUSTRIES, INC.	

Principal Place of Business 14601 PEGGY ROAD ALACHUA, FL 32615	Mailing Address PO BOX 778 ALACHUA, FL 32615 US
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01262005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3376652	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent STERNER, DAVID J 4913 NW 64 BLVD GAINESVILLE, FL 32653
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**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 David J. Sterner, Sec-Treas. 4/19/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	D MEYER, MICHAEL A 20803 NW 70TH AVE ALACHUA, FL 32616
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEYER, TERRY L 11621 NW 145 TERRACE ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERNER, DAVID J 4913 NW 64 BLVD GAINESVILLE, FL 32653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/21/05-80090-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE David J. Sterner, Sec-Treas. 4-19-05 386-462-7390
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #