2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000040296

FILED Feb 09, 2010 Secretary of State

Entity Name: STILES HOLDINGS AND INVESTMENT PARTNERSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

300 SE 2ND STREET

FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

300 SE 2ND STREET FORT LAUDERDALE, FL 33301

FEI Number: 65-0673335 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESPOSITO, ROBERT C/O STILES CORP 300 SE 2ND STREET FORT LAUDERDALE, FL 33301 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:

Title: DF

Name: STILES, TERRY W Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VT

Name: EAGON, DOUGLAS P Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V

Name: PALMER, STEPHEN R Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VS

Name: ESPOSITO, ROBERT Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

Title: \

Name: STINE, JAMES W Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

Title: \

Name: FERRERA, ROCCO Address: 300 SE 2ND STREET

City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

SIGNATURE: TERRY W. STILES P 02/09/2010