

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 23 1997 8:00 am
Secretary of State

DOCUMENT # P96000089954 (7)

1. Corporation Name
SUMMERSTONE CORPORATION

Principal Place of Business
606 BAY RIDGE RD
JACKSONVILLE FL 32216

Mailing Address
606 BAY RIDGE RD
JACKSONVILLE FL 32216-8948

3. Date Incorporated or Qualified
10/30/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1101 Blanding Blvd.

26 1101 Blanding Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 116 and 117

27 116 and 117

City & State

City & State

23 Orange Park, FL

28 Orange Park, FL

Zip

Country

Zip

Country

24 32065

25

29 32065

30

4. FEI Number
59-3407902

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STONEBERGER, ROGER LEE
606 BAY RIDGE RD
JACKSONVILLE FL 32216

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type: The printed name of registered agent is printed below (if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/D ☐ DELETE
NAME Roger L. Stoneberger
STREET ADDRESS 606 Bayridge Road
CITY-ST-ZIP Jacksonville, FL 32216

1.1 TITLE ☐ Change ☐ Addition

TITLE VP/D ☐ DELETE
NAME Robert W. Summers
STREET ADDRESS 7331 Wakefield Avenue
CITY-ST-ZIP Jacksonville, FL 32208

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ST/D ☐ DELETE
NAME Jerry W. Carter
STREET ADDRESS 1645 Country Charm Lane
CITY-ST-ZIP Jacksonville, FL 32225

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roger L. Stoneberger President 1/13/97 904-272-6447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0034474

CR2E034 (9/96)