

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000075944

Entity Name: STONERICH, INC.

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

12001 AMEDICUS BLVD.  
FORT MYERS, FL 33907

## New Principal Place of Business:

300 PLAZA DRIVE  
VESTAL, NY 13850 US

## Current Mailing Address:

300 PLAZA DRIVE  
VESTAL, NY 13850

## New Mailing Address:

300 PLAZA DRIVE  
VESTAL, NY 13850 US

FEI Number: 65-0779336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOFFMAN, BURTON I  
12001 AMEDICUS BLVD.  
FORT MEYERS, FL 33907 US

## Name and Address of New Registered Agent:

WEST FLORIDA DISTRIBUTORS - TRACEY KLUMPP  
4500 CARMICHAEL AVE.  
SARASOTA, FL 34234 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: TRACEY KLUMPP

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KOFFMAN, BURTON I  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850

Title: VP ( ) Delete  
Name: KOFFMAN, DAVID L  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850

Title: SEC ( ) Delete  
Name: KOFFMAN, JEFFREY P  
Address: 300 PLAZA DRIVE  
City-St-Zip: VESTAL, NY 13850

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID L. KOFFMAN

VP

04/25/2008

Electronic Signature of Signing Officer or Director

Date