2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# P97000081539

Entity Name: STAMBROSKY LUMBER AND TRIM, INC.

Current Principal Place of Business:

3903 INDUSTRY BOULEVARD
LAKELAND, FL 33811

New Principal Place of Business:

3903 INDUSTRY BOULEVARD
SUITE 3
LAKELAND, FL 33811

Current Mailing Address:

3515 BRIDGEFIELD DR
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 59-3483075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STAMBROSKY, RANDY
615 KIRKS WOOD CT.
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

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: P ( ) Delete
Name: STAMBROSKY, EDWARD
Address: 3515 BRIDGEFIELD DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: VP ( ) Delete
Name: STAMBROSKY, RANDY
Address: 615 KIRKSWOOD COURT
City-St-Zip: LAKELAND, FL 33813

Title: VP ( ) Delete
Name: STAMBROSKY, JANET
Address: 3515 BRIDGEFIELD DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: S ( ) Delete
Name: STAMBROSKY, JANET
Address: 3515 BRIDGEFIELD DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: T ( ) Delete
Name: STAMBROSKY, JANET
Address: 3515 BRIDGEFIELD DRIVE
City-St-Zip: LAKELAND, FL 33803

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:

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: EDWARD STAMBROSKY P 01/11/2009

Electronic Signature of Signing Officer or Director Date