

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000100269

1. Entity Name
COMMERCIAL PLASTERING & STUCCO, INC.



Principal Place of Business
**501 FALKENBERG ROAD SOUTH
SUITE D-23
TAMPA, FL 33619**

Mailing Address
**501 FALKENBERG ROAD SOUTH
SUITE D-23
TAMPA, FL 33619**



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3496990

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RICE, WILLIAM
3718 COCONUT TERRACE
BRADENTON, FL 34210**

**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 _____

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 \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RICE, WILLIAM
STREET ADDRESS	3718 COCONUT TERRACE
CITY- ST- ZIP	BRADENTON, FL 34210
TITLE	D
NAME	WALDRON, ROBERT
STREET ADDRESS	3105 244 COURT EAST
CITY- ST- ZIP	MYAKKA CITY, FL 34251
TITLE	D
NAME	VAN HOOSE, CHRISTOPHER
STREET ADDRESS	1510 67TH STREET CT. EAST
CITY- ST- ZIP	BRADENTON, FL 34208
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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01/12/05-80030-007 150.00

**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)(f), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chris VanHoose

1-7-05

Date

813-243-9167

Daytime Phone #