02191999-90002-021-$158.75-$158.75

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

PROFIT CORPORATION ANNUAL REPORT **1999**	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000081231

1. Corporation Name

D.M.A. STUCCO INC.

Principal Place of Business	Mailing Address
221 E. FRAY ST. ENGLEWOOD FL 34223	221 E. FRAY ST. ENGLEWOOD FL 34223

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
09/16/1998

4. FEI Number
65-0863646 ☐ Applied For ☐ Not Applicable

$8.75 Additional Fee Required

5. Certificate of Status Desired ☑

6. Election Campaign Financing Trust Fund Contribution ☐
$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No

	Principal Place of Business		Mailing Address
21		26	
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	2c	City & State
24	Zip / 25 Country	29	Zip / 30 Country

9. Name and Address of Current Registered Agent

ANDERSON, DAVID A
221 E. FRAY ST.
ENGLEWOOD FL 34223

10. Name and Address of New Registered Agent

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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President ☐ DELETE		1.1 TITLE	☐ Change ☐ Addition
NAME David A. Anderson		1.2 NAME	
STREET ADDRESS 221 E Fray St		1.3 STREET ADDRESS	
CITY-ST-ZIP Englewood Fl 34223		1.4 CITY-ST-ZIP	
TITLE Vice President ☐ DELETE		2.1 TITLE	☐ Change ☐ Addition
NAME David A. Anderson		2.2 NAME	
STREET ADDRESS 221 E. Fray St		2.3 STREET ADDRESS	
CITY-ST-ZIP Englewood Fl 34223		2.4 CITY-ST-ZIP	
TITLE Secretary ☐ DELETE		3.1 TITLE	☐ Change ☐ Addition
NAME Mary E Anderson		3.2 NAME	
STREET ADDRESS 221 E Fray St		3.3 STREET ADDRESS	
CITY-ST-ZIP Englewood Fl 34223		3.4 CITY-ST-ZIP	
TITLE Treasurer ☐ DELETE		4.1 TITLE	☐ Change ☐ Addition
NAME Mary E Anderson		4.2 NAME	
STREET ADDRESS 221 E Fray St		4.3 STREET ADDRESS	
CITY-ST-ZIP Englewood Fl 34223		4.4 CITY-ST-ZIP	
TITLE ☐ DELETE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE ☐ DELETE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (11/98)

14. I 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, with all other like empowered.

SIGNATURE: David Anderson - President   Jan 5, 1999   1-941-474-8050