

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029285

FILED
Mar 25, 2009
Secretary of State

Entity Name: STEWART GAS REPAIRS INC.

Current Principal Place of Business:

1384-54TH AVE NE
SAINT PETERSBURG, FL 33703

New Principal Place of Business:

1384-54TH AVE NE
SAINT PETERSBURG, FL 33703 US

Current Mailing Address:

P.O. BOX 55368
SAINT PETERSBURG, FL 33732

New Mailing Address:

P.O. BOX 55368
SAINT PETERSBURG, FL 33732 US

FEI Number: 59-3568101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINEBRENNER, JM
1384-54TH AVE NE
SAINT PETERSBURG, FL 33703 US

Name and Address of New Registered Agent:

WINEBRENNER, J M
1384-54TH AVE NE
SAINT PETERSBURG, FL 33703 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: JM WINEBRENNER

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STEWART, SHAWN E
Address: 617 SEGOVIA COURT NE
City-St-Zip: SAINT PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: STEWART, SHAWN E
Address: 617 SEGOVIA COURT NE
City-St-Zip: SAINT PETERSBURG, FL 33703 US

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: JACK WINEBRENNER

RA

03/25/2009

Electronic Signature of Signing Officer or Director

Date