

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043285

FILED
Apr 27, 2009
Secretary of State

Entity Name: STOKE, INC.

Current Principal Place of Business:

5296 S.W. MATOUSEK
STUART, FL 34997

New Principal Place of Business:

5296 S.E. MATOUSEK
STUART, FL 34997

Current Mailing Address:

5296 S.W. MATOUSEK
STUART, FL 34997

New Mailing Address:

5296 S.E. MATOUSEK
STUART, FL 34997

FEI Number: 65-1015453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, CHARLES
5296 S.W. MATOUSEK
STUART, FL 34997 US

Name and Address of New Registered Agent:

REEVES, CHARLES
5296 S.E. MATOUSEK
STUART, FL 34997 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: CHARLES REEVES

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REEVES, CHARLES
Address: 5296 S.W. MATOUSEK
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: REEVES, CHRIS
Address: 5296 S.W. MATOUSEK
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REEVES, CHARLES
Address: 5296 S.E. MATOUSEK
City-St-Zip: STUART, FL 34997

Title: D (X) Change () Addition
Name: REEVES, CHRIS
Address: 5296 S.E. MATOUSEK
City-St-Zip: STUART, FL 34997

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: CHARLES REEVES

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date