

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097358

FILED
Mar 13, 2009
Secretary of State

Entity Name: DOUG PARSONS STUCCO, INC.

Current Principal Place of Business:

121 TRIPLE DIAMOND BLVD
UNIT 5
VENICE, FL 34275

New Principal Place of Business:

1605 HAMMOCK DRIVE
NOKOMIS, FL 34275

Current Mailing Address:

P.O. BOX 19319
S
SARASOTA, FL 34276

New Mailing Address:

P.O. BOX 19319
SARASOTA, FL 34276

FEI Number: 65-0961594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACY, CATHERINE L
2058 CONSTITUTION BLVD
SARASOTA, FL 34231 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: PARSONS, DOUG
Address: 1605 HAMMOCK DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: VPT () Delete
Name: PARSONS, LINDA
Address: 1605 HAMMOCK DR
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: CUPP, JEFFREY L
Address: 836 EAST 7TH ST
City-St-Zip: ENGLEWOOD, FL 34223

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:

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: DOUG PARSONS

PRES

03/13/2009

Electronic Signature of Signing Officer or Director

Date