

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90244 022 ***150.00

DOCUMENT # 596623

1. Entity Name

Staco Equipment Services, Inc.



DO NOT WRITE IN THIS SPACE

20034377

2. Principal Place of Business

4267 Ondich Rd.
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 160715
Suite, Apt. #, etc.

City & State

Apopka, FL

City & State

Altamonte Springs, FL

Zip

32712

Country

USA

Zip

32716

Country

USA

4. FEI Number

59-3101815

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Euell Stallings Sr.

Street Address (P.O. Box Number is Not Acceptable)

4267 Ondich Rd.

City

Apopka

FL

Zip Code

32712

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President

Euell Stallings Sr.

4267 Ondich Rd.

Apopka, FL 32712

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

Charles Stallings

4255 Ondich Rd.

Apopka, FL 32712

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

Euell Stallings Jr.

801 Longwood-Markham Rd.

Sanford, FL 32771

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Secretary

Kimberly Stallings Redmond

3255 Delbrook Dr.

Deltona, FL 32738

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Treasurer

Dona Stallings

4267 Ondich Rd.

Apopka, FL 32712

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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**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)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Euell Stallings Sr. (Euell Stallings Sr.)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03

Date

407-869-1311

Daytime Phone #

CR2E034B (12/02)