2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2013
Secretary of State
CC2233391358

DOCUMENT# P07000030615

Entity Name: SUPERIOR STONE DISTRIBUTORS, INC.

Current Principal Place of Business:

5590 SHIRLEY STREET
NAPLES, FL 34109

Current Mailing Address:

5590 SHIRLEY STREET
NAPLES, FL 34109 US

FEI Number: 20-8646958

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BONNESS, JOSEPH DIII
5590 SHIRLEY STREET
NAPLES, FL 34109 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEOD
Name	BONNESS, JOSEPH DIII
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	P
Name	KOCSES, BRIAN A
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	KELLY, MARGARET M
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	TREU, MARY V
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	CFOV
Name	KELLY, DANIEL J
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	SD
Name	BAILIE, KATHLEEN M
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	KOCSES, EILEEN
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	BONNESS, THERESA M
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: DANIEL J. KELLY CFO 04/25/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	BONNESS, MAUREEN S
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	BONNESS COTY, PATRICE
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	BLACK, BRIDGET M
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109

Title	D
Name	MACKENZIE, SHARON M
Address	5590 SHIRLEY STREET
City-State-Zip:	NAPLES FL 34109