#### 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 app above, or on an attachment with all other like empowered.

## SIGNATURE: FRED ZICHLIN

Electronic Signature of Signing Officer/Director Detail

# 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021340

Entity Name: STONEMAN'S STATUELAND, INC.

### Current Principal Place of Business:

4524 EISENHOWER BLVD #B TAMPA, FL 33634

### Current Mailing Address:

4524 EISENHOWER BLVD #B TAMPA, FL 33634

### FEI Number: 59-3591137

### Name and Address of Current Registered Agent:

ZICHLIN, FRED 4524 EISENHOWER BLVD #B TAMPA, FL 33634 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	ATURE: FRED ZICHLIN			
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P, PRESIDENT	Title	VP	
Name	ZICHLIN, FRED	Name	SALLY, PLISKOW	
Address	4524 EISNHOWER BLVD #B	Address	10375 CARROLLWOOD LANE UNIT 333 TAMPA FL 33618	
City-State-Zip:	TAMPA FL 33634	City-State-Zip:		

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

PRESIDENT	03/03/2016

#### FILED Mar 03, 2016 Secretary of State CC5689808041

Certificate of Status Desired: No

Date