


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 14, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F0000007016**  
1. Entity Name  
**SERVICE PAINTING COMPANY OF ARKANSAS**



Principal Place of Business      Mailing Address  
P.O. BOX 306                              P.O. BOX 306  
BEAUMONT, TX 77704                      BEAUMONT, TX 77704

**DO NOT WRITE IN THIS SPACE**



02042005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**76-0066605**      Not Applicable

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
  
C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SINGLETON, CHARLES
STREET ADDRESS	1610 CONSTITUTION
CITY-ST-ZIP	ASHDOWN, AR 71822
TITLE	S
NAME	DUCHARME, LARRY
STREET ADDRESS	1670 E CARDINAL DRIVE
CITY-ST-ZIP	BEAUMONT, TX 77704
TITLE	CD
NAME	BROCK, JERROLD R
STREET ADDRESS	1670 E. CARDINAL STREET
CITY-ST-ZIP	BEAUMONT, TX 77704
TITLE	D
NAME	BROCK, BRADEN
STREET ADDRESS	1670 E. CARDINAL STREET
CITY-ST-ZIP	BEAUMONT, TX 77704
TITLE	D
NAME	BROCK, TODD D
STREET ADDRESS	1670 E. CARDINAL STREET
CITY-ST-ZIP	BEAUMONT, TX 77704
TITLE	T
NAME	SMITH, PHIL
STREET ADDRESS	1670 E CARDINAL
CITY-ST-ZIP	BEAUMONT, TX 77704

11. **DO NOT WRITE  
IN THIS SPACE**

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02/14/05-80067-005 150.00

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Phil Smith      Phil Smith      2/10/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #