

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000042335

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: CHRISTIE'S CUSTOM PAINTING & MORE INC.

## Current Principal Place of Business:

8263 OSBERT AVENUE  
NORTH PORT, FL 34287 US

## New Principal Place of Business:

## Current Mailing Address:

8263 OSBERT AVENUE  
NORTH PORT, FL 34287 US

## New Mailing Address:

FEI Number: 20-2532421

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHRISTIE, SHAWN  
8263 OSBERT AVENUE  
NORTH PORT, FL 34287 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: D,P ( ) Delete  
Name: CHRISTIE, SHAWN  
Address: 8263 OSBERT AVENUE  
City-St-Zip: NORTH PORT, FL 34287 US

Title: VP,S ( ) Delete  
Name: SPENCER, SHERI  
Address: 8263 OSBERT AVENUE  
City-St-Zip: NORTH PORT, FL 34287 US

Title: T ( ) Delete  
Name: MENDEZ, OSCAR  
Address: 8263 OSBERT AVENUE  
City-St-Zip: NORTH PORT, FL 34287 US

## 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 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: SHAWN CHRISTIE

DP

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date