

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000569

FILED
Jan 19, 2007
Secretary of State

Entity Name: SHARPE FINISHES INCORPORATED

Current Principal Place of Business:

1717 PATTERSON STREET
DECATUR, IN 46733

New Principal Place of Business:

Current Mailing Address:

1717 PATTERSON STREET
DECATUR, IN 46733

New Mailing Address:

FEI Number: 35-1846062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARPE, HEATHER
11231 US HIGHWAY 1 #113
NORTH PALM BEACH, FL 33408 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: C () Delete
Name: SHARPE, JOHN
Address: 1234 WOODRIDGE DRIVE
City-St-Zip: DECATUR, IN 46733

Title: P () Delete
Name: SHARPE, JOHN H
Address: 1234 WOODRIDGE DRIVE
City-St-Zip: DECATUR, IN 46733

Title: V () Delete
Name: SHARPE, LINDA E
Address: 1234 WOODRIDGE DRIVE
City-St-Zip: DECATUR, IN 46733

Title: S () Delete
Name: SHARPE, HEATHER J
Address: 745 SANCTUARY COVE DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

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:

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: JOHN H. SHARPE

PRES

01/19/2007

Electronic Signature of Signing Officer or Director

_____ Date