

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 002781

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** THE E.O. PAINTER PRINTING COMPANY

**Current Principal Place of Business:**

4900 U.S. HWY 17 NORTH  
DELEON SPRINGS, FL 32130

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 877  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

**FEI Number:** 59-0388460

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOHNSTON, S. DICK  
1040 N. AMELIA AVE.  
DELAND, FL 32724 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOHNSTON, SIDNEY D  
Address: 1040 NORTH AMELIA AVE.  
City-St-Zip: DELAND, FL 32724

Title: VD  
Name: JOHNSTON, JEFFREY B  
Address: 2141 CHURCH STREET  
City-St-Zip: GLENWOOD, FL 32722

Title: S  
Name: JOHNSTON, DONNA D  
Address: 2141 CHURCH STREET  
City-St-Zip: GLENWOOD, FL 32722

Title: T  
Name: JOHNSTON, MARK A  
Address: 409 FATIO RD  
City-St-Zip: DELAND, FL 32720

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: DONNA D. JOHNSTON

S

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date