## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**FILED** May 01 1996 8:00 am Secretary of State

DOCUMENT #  1. Corporation Name  COPONADO PAINT (	281124	(8)			Secretar	y or Stat	е	
CORONADO PAINT COMPANY, INC.								
Principal Place of Business	Mailin	Mailing Address		# FOULTH II DIE FEFET INDE	OLI BADI BIBAL DIDA DI	811 81811 81 <b>6</b> 11 81841 1831		
308 OLD COUNTY ROAD EDGEWATER FL 32132-1812		308 OLD COUNTY ROAD EDGEWATER FL 32132-1812						
•					<ol> <li>Date Incorporated or Qualified 05/05/1964</li> </ol>	3a. Date of La 04/2	st Report 25/1995	
2. Principal Place of Business	<b>)</b>	2a. Mailing Address			4. FEI Number		Applied For	
21		26		59-1051735 Not Applicable		Not Applicable		
Suite, Apt. #, etc.	[27]	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	Ci 28	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Coun 24 25	29	Zip Country <b>30</b>			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes XY Yes No			
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
11550150 person n			81	Name				
HEEBNER, PETER B. 523 NORTH HALIFAX AVENUE DAYTONA FL 32018			82	Street Ad	ddress (P.O. Box Numbor is Not Acceptable)			
			83					
			84	,		FL 85	Zip Code	
<ol> <li>Pursuant to the provisions of Sec or registered agent, or both, in the familiar with, and accept the oblig</li> </ol>	e state di nunda, such co	anoe was allinorzeo by	above the corp	named corpi oration's bo	oration submits this statement for the purp and of directors. I hereby accept the appo	oose of changing intraent as registe	its registered office ered agent. I am	

SIGNATURE Signature, typed or printed name of registered agent and tibe it applicable (NOTE: Registured Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE P/D 1.1 TITLE Change ■ Addition BOSSETT, CHRISTIAN NAME 1.2 NAME 308 OLD COUNTRY RD STREET ADDRESS 1.3 STREET ADDRESS EDGEWATER FL CITY-\$1-ZIP 1.4 CI1Y - ST - ZIP DELETE TITLE 2 1 TITLE 7/5 Change ☐ Addition KEESECKER, ROBERT NAME 2.2 NAME 308 OLD COUNTRY RD STREET ADDRESS 2.3 STREET ADDRESS **EDGEWATER FL** CITY-ST-ZIP 24 CITY - ST - ZIP TITLE DELETE 3 1 TITLE Addition Addition Change NAME Boshell, Greg 3.2 NAME 48 WALKER STREET AUSTRALIA 2046 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP DELETE 4. 1 TITLE ☐ Addition DILL, DAVID 308 OW COUNTY ROAD NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS EDGEWATER, FL 32132 CITY-ST-ZIP 4.4 CHY - S1 - ZIP TITLE DELETE 5 1 THLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6. 1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - S1 - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and triat 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 enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address. changed, or on an attachment with an address

SIGNATURE:

IGNING OFFICER OR DIRECTOR