2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 27, 2006 08:00 AN **DOCUMENT #483658** Secretary of State ANVIL PAINTS AND COATING, INC. Principal Place of Business Mailing Address 1255 STARKEY ROAD 1255 STARKEY ROAD LARGO, FL 33771 LARGO, FL 33771 THE REPORT OF THE PROPERTY OF Committee of Supplementation - april i kade to dedictiff DOES NOT THE SECOND زبر 01102006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1624505 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEACOCK, RAY DO NOT WRITE 2348 SUNSET POINT ROAD CLEARWATER, FL 33765 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. 11000000402489 <u> 02/03/06-80011-002-150-00</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when regetating) DATE \$5.00 May Be. 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME HEALEY, THOMAS G STREET ADDRESS 1255 STARKEY ROAD CITY-ST-ZIP LARGO, FL TITLE BRAAKSMA, MARVIN D NAME STREET ADDRESS 1255 STARKEY ROAD CITY-ST-7IP LARGO, FL TITLE HEALEY, THOMAS G NAME STREET ADDRESS 1255 STARKEY ROAD DO NOT WRITE LARGO, FL CITY-ST-ZIP ΠΠF PD IN THIS SPACE NAME GARVER, CLYDE M STREET ADDRESS 1255 STARKEY RD CITY-ST-ZIP LARGO, FL TITLE NAME ROTH, GLENN R STREET ADDRESS 1255 STARKEY ROAD CITY-ST-ZIP LARGO, FL THE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutas. 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 of trustee empoyered to effect 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:

NAME STREET ADORESS CITY-ST-ZIP

Glenn Roth

01/24/06 727-535-1411 Data Daytime Prione #