## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 488268** 

FILED Apr 03, 2009 Secretary of State

Entity Nar	ne: FLORIDA	A PAINT CO.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
5277 LENG JACKSON	OX AVE VILLE, FL 32:	205					
Current Mailing Address:			New Maili	New Mailing Address:			
5277 LENG JACKSON	OX AVE VILLE, FL 32:	205					
FEI Number:	59-1627545	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )		
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
ONE INDE	OK, H LEON I PENDENT DI PENDENT SO VILLE, FL 32:	RIVE QUARE					
The above in the State	named entity e of Florida.	submits this statement for the p	urpose of changing	its registered o	office or registered agent, or both,		
SIGNATUR	RE:						
	Electro	nic Signature of Registered Age	nt	Date			
Election Car	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	ST ( STRAITIFF, EL 5277 LENOX A JACKSONVILL	VE.	Title: Name: Address: City-St-Zip:	ST (X ANDERSON, E 5277 LENOX A JACKSONVILL	VE.		
Title: Name: Address: City-St-Zip:	PD ( SCROGINS, R 5277 LENOX A JACKSONVILL	VE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	EPD ( MCCALL, STE 5277 LENOX A JACKSONVILL	VE	Title: Name: Address: Citv-St-Zip:	(	) Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify 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: ELAINE M ANDERSON 04/03/2009 ST