

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 562334

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: PROFESSIONAL FINISHES, INC.

**Current Principal Place of Business:**

406 N PENNOCK LNAE  
JUPITER, FL 33458 US

**New Principal Place of Business:**

**Current Mailing Address:**

406 N PENNOCK LANE  
JUPITER, FL 33458 US

**New Mailing Address:**

FEI Number: 59-1813507      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOLMAUGH, LEWIS L  
406 N. PENNOCK LN.  
JUPITER, FL 33458 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: P ( ) Delete  
Name: LOLMAUGH, LEWIS L.,  
Address: 5966 LOXAHATCHEE PINES DR  
City-St-Zip: JUPITER, FL 33458 US

Title: S ( ) Delete  
Name: LOLMAUGH, KATHY E,  
Address: 5966 LOXAHATCHEE PINES DR  
City-St-Zip: JUPITER, FL 33458

Title: VP ( ) Delete  
Name: LOLMAUGH, MICHAEL L.,  
Address: 500 E. WHITNEY DRIVE  
City-St-Zip: JUPITER, FL 33478

Title: VP ( ) Delete  
Name: JARVIS, WILLIAM F.,  
Address: 407 REO DRIVE  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: LOLMAUGH, MICHAEL L.,  
Address: 17429 128TH TRAIL N  
City-St-Zip: JUPITER, FL 33478

Title: VP (X) Change ( ) Addition  
Name: JARVIS, WILLIAM F.,  
Address: 18037 PALM POINT DR.  
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEWIS L. LOLMAUGH

P

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date