2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# 655450

Entity Name: POLY COATINGS OF THE SOUTH, INC.

Current Principal Place of Business:

5944 SANDPHILL ROAD
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

5944 SANDPHILL ROAD
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-1990280 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAPATHA, BERNARD
5944 SANDPHILL ROAD
SARASOTA, FL 34232 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:	ZAPATHA, BERNARD,	
Address:	5944 SANDPHILL RD	
City-St-Zip:	SARASOTA, FL	
Title:	D	( ) Delete
Name:	ZAPATHA, ELAINE,	
Address:	5944 SANDPHILL RD	
City-St-Zip:	SARASOTA, FL	
Title:	V	( ) Delete
Name:	ZAPATHA, WAYNE B	
Address:	5944 SANDPHIL RD.	
City-St-Zip:	SARASOTA, FL 34232	
Title:	V	( ) Delete
Name:	HESS, DONNA E	
Address:	5944 SANDPHIL RD.	
City-St-Zip:	SARASOTA, FL 34232	
Title:	V	( ) Delete
Name:	ZAPATHA, GLENN	
Address:	5944 SANDPHIL RD.	
City-St-Zip:	SARASOTA, FL 34232	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNA HESS VP 04/26/2006

Electronic Signature of Signing Officer or Director — Date