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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701235

1. Corporation Name

FLORIDA PAINT AND COATINGS ASSOCIATION INC.

Principal Place of Business

101 WAYNE PLACE
TAMPA FL 33619
US

Mailing Address

101 WAYNE PLACE
TAMPA FL 33619
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/23/1960

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ALLEN, DARYL A
GULF COAST CHEMICAL CO.
101 WAYNE PLACE
TAMPA FL 33619

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME ALLEN, DARYL
STREET ADDRESS 101 WAYNE PLACE
CITY-ST-ZIP TAMPA FL 33619

TITLE P ☒ DELETE
NAME SAULS, VERNON
STREET ADDRESS 5126 CAUSEWAY BOULEVARD
CITY-ST-ZIP TAMPA FL 33619

TITLE P ☐ DELETE
NAME BALOGA, MARTY
STREET ADDRESS 9180 35TH STREET NORTH
CITY-ST-ZIP PINELLAS PARK FL 33782

TITLE S ☐ DELETE
NAME CARRILLO, VIC
STREET ADDRESS 7210 N.W. 77 STREET
CITY-ST-ZIP MEDLEY FL 33166

TITLE D ☐ DELETE
NAME DHAWAN, RAJENDRA
STREET ADDRESS 308 OLD COUNTY ROAD
CITY-ST-ZIP EDGEWATER FL 32132

TITLE D ☐ DELETE
NAME PESOLA, PHILIP
STREET ADDRESS 3710 N.W. COUNTY HIGHWAY 326
CITY-ST-ZIP Ocala FL 32678

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE UP ☐ Change ☒ Addition
1.2 NAME Paul Daly
1.3 STREET ADDRESS 1880 NW 18 ST
1.4 CITY-ST-ZIP Pompano Beach FL 33069

2.1 TITLE Treasurer ☐ Change ☒ Addition
2.2 NAME Greg Daininger
2.3 STREET ADDRESS 4590 60 AVE N
2.4 CITY-ST-ZIP Ft Pompano FL 33714

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Paul E Daly

4-15

954-971-9111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037-(11/98)