

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831468

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** MOBILE PAINT MANUFACTURING COMPANY OF DELAWARE, INC.

**Current Principal Place of Business:**

4775 HAMILTON BLVD  
THEODORE, AL 36582

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 717  
THEODORE, AL 365900717 US

**New Mailing Address:**

**FEI Number:** 63-0143090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ATKINS, RALPH  
249 PARK STREET  
JACKSONVILLE, FL 32204 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WARNER, DOUGLAS  
Address: 2 EAST 38TH STREET  
City-St-Zip: CHATTANOOGA, TN 37410 US

Title: D  
Name: WILSON, JOHN R JR  
Address: 4775 HAMILTON BLVD  
City-St-Zip: THEODORE, AL 36582 US

Title: PD  
Name: WILLIAMS, ROBERT  
Address: 4775 HAMILTON BLVD  
City-St-Zip: THEODORE, AL 36582 US

Title: D  
Name: GILMAN, SARAH  
Address: 801 LEE AVE  
City-St-Zip: LOOKOUT MTN, TN 37350 US

Title: D  
Name: MEAUT, GARY  
Address: 4775 HAMILTON BLVD  
City-St-Zip: THEODORE, AL 36582 US

Title: D  
Name: GILMAN, DOUG  
Address: 2809 RIDGEWOOD RD  
City-St-Zip: LAGRANGE, KY 40031

I hereby 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 all other like empowered.

SIGNATURE: JOHN WILSON

D

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date