2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 842617

1. Entity Name
SCOTT PAINT COMPANY, INC.

Principal Place of Business	Mailing Address
7839 FRUITVILLE ROAD SARASOTA, FL 34240	7839 FRUITVILLE ROAD SARASOTA, FL 34240

DO NOT WRITE IN THIS SPACE

03142006 No Chg-P CR2E034 (11/05)

4. FEI Number
52-1140127
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVUCE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPGM
NAME	BARNES, DANIEL C
STREET ADDRESS	7839 FRUITVILLE ROAD
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	SD
NAME	RAMER, BRUCE
STREET ADDRESS	132 S. RODEO DR
CITY-ST-ZIP	BEVERLY HILLS, CA 90212
TITLE	COB
NAME	LAWRENCE, RAMER
STREET ADDRESS	1999 AVENUE OF THE STARS
CITY-ST-ZIP	LOS ANGELES, CA
TITLE	ASC
NAME	BOSSART, THEODORE E II
STREET ADDRESS	7839 FRUITVILLE ROAD
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	PCOO
NAME	RAMER, DOUGLAS
STREET ADDRESS	800 N CHARLES ST, #201M
CITY-ST-ZIP	BALTIMORE, MD 21201
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000493108
04/24/06-80016-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: for Theodore E. Bossart II 4-6-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #