

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842617

FILED  
Mar 27, 2009  
Secretary of State

Entity Name: SCOTT PAINT COMPANY, INC.

## Current Principal Place of Business:

7839 FRUITVILLE ROAD  
SARASOTA, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

7839 FRUITVILLE ROAD  
SARASOTA, FL 34240

## New Mailing Address:

FEI Number: 52-1140127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: VPGM ( ) Delete  
Name: BARNES, DANIEL C  
Address: 7839 FRUITVILLE ROAD  
City-St-Zip: SARASOTA, FL 34240

Title: SD ( ) Delete  
Name: RAMER, BRUCE  
Address: 132 S. RODEO DR  
City-St-Zip: BEVERLY HILLS, CA 90212

Title: COB ( ) Delete  
Name: LAWRENCE, RAMER  
Address: 1999 AVENUE OF THE STARS  
City-St-Zip: LOS ANGELES, CA

Title: ASC ( ) Delete  
Name: BOSSART, THEODORE E II  
Address: 7839 FRUITVILLE ROAD  
City-St-Zip: SARASOTA, FL 34240

Title: PCOO ( ) Delete  
Name: RAMER, DOUGLAS  
Address: 800 N CHARLES ST, #201M  
City-St-Zip: BALTIMORE, MD 21201

## 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 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: THEODORE BOSSART, II

VP

03/27/2009

Electronic Signature of Signing Officer or Director

Date