

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 850239

FILED
Apr 05, 2005
Secretary of State

Entity Name: WIKOFF COLOR CORP. OF S.C.

Current Principal Place of Business:

1886 MERRITT ROAD
FT MILL, SC 29715

New Principal Place of Business:

Current Mailing Address:

1886 MERRITT ROAD
FT MILL, SC 29715

New Mailing Address:

FEI Number: 56-0934083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRKLAND, KEVIN
2619 ROLAC ROAD
JACKSONVILLE, FL 32207 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: D () Delete
Name: SMITH, LANTY L
Address: 1401 WESTRIDGE RD
City-St-Zip: GREENSBORO, NC 27410

Title: PD () Delete
Name: LAMBERT, PHILIP L.,
Address: 2922 CROSS COUNTRY ROAD
City-St-Zip: CHARLOTTE, NC

Title: TVP () Delete
Name: RORIE, MARION B.,
Address: 1865 TANGLEBRIAR CRT
City-St-Zip: MATTHEWS, NC

Title: D () Delete
Name: CLARK, VEDA F
Address: 369 HATHERLY RD
City-St-Zip: SCITUATE, MA 02066

Title: D () Delete
Name: LOWD, HARVEY L
Address: 4233 LUPTON COURT
City-St-Zip: HIGH POINT, NC 27262

Title: S () Delete
Name: STAPLETON, JOHN B
Address: 1657 HEATHERHILL ROAD
City-St-Zip: ROCK HILL, SC 29732

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:

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 Section 119.07(3)(i), 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: JOHN BRUCE STAPLETON

SEC

04/05/2005

Electronic Signature of Signing Officer or Director

Date