2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007
Secretary of State

DOCUMENT# F03000003350

Entity Name: COLOR GUILD INTERNATIONAL, INC.

Current Principal Place of Business:

1215 MILLENIUM PARKWAY
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

150 DASCOMB ROAD
J.DEANGELIS
ANDOVER, MA 01810

New Mailing Address:

FEI Number: 23-7118358 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLISEO, JOE
1215 MILLENIUM PARKWAY
BRANDON, FL 33511 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	( ) Delete
Name:	WARD, JOHN A	
Address:	4229 TULKA MORE RD.	
City-St-Zip:	MEMPHIS, TN 38117	
Title:	D	( ) Delete
Name:	PAKRADOONI, REGINA HALEY	
Address:	1316 WYNGATE ROAD	
City-St-Zip:	WYNNEWOOD, PA 19096	
Title:	PD	( ) Delete
Name:	O'CONNOR, KEVIN	
Address:	ARIPOSA MOORETOWN	
City-St-Zip:	CELBRIDGE, CO, KILDARE IRELA, FL 33511	
Title:	SD	( ) Delete
Name:	O'LEARY, DAVID M	
Address:	4373 AZTEC WAY	
City-St-Zip:	OKEMOS, MI 48864	
Title:	TD	( ) Delete
Name:	DEANGELIS, JOE	
Address:	25 APPLETON ROAD	
City-St-Zip:	WAKEFIELD, MA 01880	
Title:	D	( ) Delete
Name:	WEBER, MIKE	
Address:	725 2ND AVE N	
City-St-Zip:	MINNEAPOLIS, MN 55406	

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH DE ANGELIS TD 02/12/2007

Electronic Signature of Signing Officer or Director — Date