

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004772

FILED  
Apr 18, 2007  
Secretary of State

Entity Name: SCHNELL RESTORATION SERVICES, INC.

## Current Principal Place of Business:

6222 TOWER LANE  
SUITE A-11  
SARASOTA, FL 34240

## New Principal Place of Business:

4305 WEST CAYUGA STREET  
TAMPA, FL 33614 US

## Current Mailing Address:

6222 TOWER LANE  
SUITE A-11  
SARASOTA, FL 34240

## New Mailing Address:

1343 TILE FACTORY LANE  
LOUISVILLE, KY 40213 US

FEI Number: 01-0795603

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ICARD, THOMAS F JR.  
2033 MAIN STREET, SUITE 600  
SARASOTA, FL 34237 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: PRES ( ) Delete  
Name: SCHNELL, LAURA K  
Address: 1343 TILE FACTORY LANE  
City-St-Zip: LOUISVILLE, KY 40213

Title: VICE ( ) Delete  
Name: SCHNELL, MICHAEL B  
Address: 1343 TILE FACTORY LANE  
City-St-Zip: LOUISVILLE, KY 40213

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: LAURA K. SCHNELL

PRES

04/18/2007

Electronic Signature of Signing Officer or Director

Date