2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006679

Entity Name: COMMONWEALTH LAMINATING & COATING, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
73 S.W. 12TH AVE. SUITE 102 DANIA BEACH, FL 33004						
Current Mailing Address:			New Mailir	New Mailing Address:		
P.O.BOX 4668 MARTINSVILLE, VA 24115						
FEI Number:	54-1781261	FEI Number Applied For () FEI Nu	mber Not Appli	licable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
GABRIEL, TONYA 73 S.W. 12TH AVE. SUITE 102 DANIA BEACH, FL 33004 US						
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:						
	Electror	nic Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP () DYKE, STEVE 50 PUBLIC SQ CLEVELAND, C		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPS () DAILEY, MATTI 50 PUBLIC SQ CLEVELAND, C	SUITE 4000	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	P () PHILLIPS, STE 370 ISLAND VI PENHOOK, VA	EW DR.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () PHILLIPS, MAT PO BOX 4668 MARTINSVILLE		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () BRYANT, MELA PO BOX 4668 MARTINSVILLE		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition BENSON, GEORGE 10 RIVER SIDE RD ROCKY RIVER, OH 44116		

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: MELANIE BRYANT VP 04/29/2008