

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003797

FILED
Feb 22, 2008
Secretary of State

Entity Name: COLOR WHEEL PAINTS & COATINGS, INC.

Current Principal Place of Business:

2814 SILVER STAR RD.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

2814 SILVER STAR RD.
ATTN: MARY SCHIMMER
ORLANDO, FL 32808

New Mailing Address:

2814 SILVER STAR RD.
ATTN: JUDY CAIRNS
ORLANDO, FL 32808

FEI Number: 20-4777620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: TUSSIE, ALFREDO A MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 80124

Title: D () Delete
Name: LEVY, MARCOS A MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 80124

Title: D () Delete
Name: FLORES, JOSE R MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 80124

Title: D () Delete
Name: MEYOHAS, MARCOS A MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 11560

Title: PD () Delete
Name: CHILD, KENT P MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 80124

Title: VST () Delete
Name: COLBOURNE, DANIEL M MR.
Address: 8600 PARK MEADOWS DR #300
City-St-Zip: LONE TREE, CO 80124

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 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: DANIEL M. COLBOURNE

VST

02/22/2008

Electronic Signature of Signing Officer or Director

Date