

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F32541

FILED
Apr 11, 2006
Secretary of State

Entity Name: ACHILLES PAINTING, INC.

Current Principal Place of Business:

213 S W CAPE CORAL
CAPE CORAL, FL 33914

New Principal Place of Business:

5956 S.W.FIRST COURT
CAPE CORAL, FL 33914

Current Mailing Address:

213 S W CAPE CORAL
CAPE CORAL, FL 33914

New Mailing Address:

5956 S.W. FIRST COURT
CAPE CORAL, FL 33914

FEI Number: 59-2110490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACHILLES, LESLIE JR
213 W. CAPE CORAL PARKWAY
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

ACHILLES, LESLIE JR
5956 S.W. FIRST COURT
CAPE CORAL, FL 33914 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:

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: ACHILLES, LESLIE C J, R
Address: 213 W. CAPE CORAL PARKWAY
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: ACHILLES, LESLIE C J, R
Address: 5956 S.W. FIRST COURT
City-St-Zip: CAPE CORAL, FL 33914

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: LESLIE C. ACHILLES JR.

PRES

04/11/2006

Electronic Signature of Signing Officer or Director

Date