2008 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-7IP

Feb 25, 2008 08:00 AN **Secretary of State** DOCUMENT #F43314 INDIAN RIVER PAINT COMPANY Principal Place of Business Mailing Address 2865 KIRBY AVENUE 2865 KIRBY AVENUE PALM BAY, FL 32905 PALM BAY, FL 32905 01222008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 59-2140047 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FARRIOR, CRAIG DO NOT WRITE 2278 WHITESIDE AVE. S.E. PALM BAY, FL 32909 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PD TITLE NAME FARRIOR, CRAIG STREET ADDRESS 2278 WHITESIDE AVE, SE CITY-ST-ZIP PALM BAY, FL TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRI CITY-ST-ZIP IN THIS SPA TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

FILED

12. I nereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

CLATIG FARRIOR

Z/19/08 321-129-0640