

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H68262 (5)
1. Corporation Name
REGENCY PAINTING & PAPERHANGING COMPANY, INCORPORATED

Principal Place of Business

Mailing Address

**1844 JACKSON STREET
P O BOX 1463
HOLLYWOOD FL 33022**

**P O BOX 1463
P O BOX 1463
HOLLYWOOD FL 33022
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1985

4. FEI Number

59-2587071

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 2903 S.W. 81st Terrace

2a. 2903 S.W. 81st Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Davie, Fl.

28 Davie, Fl.

Zip

Country

Zip

Country

24 33328

25

29 33328

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THOSTENSON, DENNIS
1844 JACKSON STREET
HOLLYWOOD FL 33021**

81 Name

Thostenson, Dennis

82 Street Address (P.O. Box Number is Not Acceptable)

2903 S.W. 81st Terrace

83

84 City

Davie

FL

85 Zip Code

33328

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD THOSTENSON, ARTHUR**
STREET ADDRESS **1844 JACKSON STREET**
CITY-ST-ZIP **HOLLYWOOD FL**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **PD Thostenson, Arthur**
1.3 STREET ADDRESS **2903 S.W. 81st. Terrace**

TITLE ☐ DELETE
NAME **VD THOSTENSON, DENNIS**
STREET ADDRESS **1844 JACKSON ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **Davie, Fl. 33328**
2.3 STREET ADDRESS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME **VD Thostenson, Dennis**
3.3 STREET ADDRESS **2903 S.W. 81st Terrace**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME **Davie, Fl. 33328**
4.3 STREET ADDRESS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address. **DENNIS THOSTENSON**

SIGNATURE:

2/1/98 (954) 370-3358

CR2E034 (10/97)