


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # H84838	
1. Entity Name CLASSIC PAINTS, INC.	

Principal Place of Business % DONNA M. DUTTON 1610 CYPRESS DRIVE JUPITER, FL 33469	Mailing Address % DONNA M. DUTTON 1610 CYPRESS DRIVE JUPITER, FL 33469
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01112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2612315	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DUTTON, DONNA M. 1610 CYPRESS DRIVE JUPITER, FL 33469

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	STD DUTTON, DONNA M. 5403 PENNOCK POINT ROAD JUPITER, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VD DUTTON, JAMES ALBERT 261 MAPLECREST JUPITER, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VD DUTTON, LAWRENCE ARTHUR 500 W. WHITNEY DRIVE JUPITER, FL
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04/29/04-80092-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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: Donna M. Dutton **DONNA M. DUTTON** **SECRETARY** 4/27/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #