FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

J21965

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|-----------|------|----------|------|
| PAINTING | ANU | STAINING | ING. |

Frincipal Place of Business 1117 BEACHUM DRIVE TALLAHASSEE FL 32301

Mailing Address

1117 BEACHUM DRIVE TALLAHASSEE FL 32301



| | | | | Date Incorporated or Qualified 07/01/1986 | 3a. Date of Last Report 03/16/1995 | | | | | |
|------------------|---|---|-------------------------------------|---|--|---------------|----------|---------------------------|--|--|
| 2. Principa' Pla | N | 2a. Mailing Address | | | 4. FEI Number | | | Applied For | | |
| | BEACHUM DR. | 26 SAME | · | | 59-2609608 | | | Not Applicable | | |
| Suite, Apt. # | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | , | 75 Additional e Required | | |
| | L. Fi | City & State | , | | Election Campaign Financing Trust Fund Contribution | | | .00 May Be ded to Fees | | |
| 7m 4 プレン | | Ζιρ 29 | Countr | <i>'</i> | This corporation has liability for Florida Statutes Yes | intangible ta | ıx under | s 199.032, | | |
| | 9. Name and Address of Curren | t Registered Agent | | T | 10. Name and Address of New F | legistered | Agent | | | |
| | | | 81 | Nam | 9 | | | | | |
| ERICHS | on, ronald e. | | 82 | Stree | t Address (P.O. Box Number is Not Acceptate | nie) | | | | |
| 909 PALAWAN RD. | | | " | Street Address (r. o. Dox Hornberts Not Acceptable) | | | | | | |
| TALLAH, | ASSEE FL 32304 | | 83 | | | | | | | |
| | | | 84 | City | | | [] | 7.0.1 | | |
| | | | 0- | Oity | | FL | 85 | Zip Code | | |
| SIGNATURE . | h, and accept the obligations of, Sect Steame types or protest name of registers agent | on 607.0505, Florida Statuti | es. | | s board of directors. I hereby accept the app | DATE | | | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFF | ICERS AND | DIREC | TORS IN 12 | | |
| THE | P | ☐ DELETE | 1 1 TITLE | | | | Chang | e 🔲 Addition | | |
| MAME. | ERICHSON, RON | | 12 NAME | | | | | | | |
| STREET ADDRESS | 909 PALAMAN RD. | | 13 STREE | i address | ; | | | | | |
| 01Y-\$1-Z0F | TALLAHASSEE FL | · · | 1.4 CITY- | ST - ZIP | | | | | | |
| 11111 | VP | □ DELETE | 2 1 TIFLE | | | | Chang | e 🔲 Addition | | |
| CIM- | SIROIS, MIKE | | 2.2 NAME | | | | | | | |
| FIRELL ADDRESS | 2097 KIMBERLY LANE | | 2 3 STREE | | | | | | | |
| aty style | TALLAHASSEE FL | E DELETE | 2 4 CITY- | ST-ZIP | | | | | | |
| 111.5 | S NODOAN TERRY | DELETE | 3 1 T:TLE | | | | Chang | e 🗀 Addition | | |
| VAMÍ | MORGAN, TERRY | | 3 2 NAME | | | | | | | |
| STREET ADORESS | 1009 IDLEWICD DR. #30 TALLAHASSEE FL | | 3.3 STREE | | 5 | | | | | |
| HT 51-200 HT | VP | DELETE | 3 4 CITY - 4 1 TITLE | ST - ZIF | 0 | | 7 // | | | |
| y≥Mi | TURN CIERRA V | c land | 4.2 NAME | | THAN CIERRA | / [| _] Chang | e 🔀 Addition | | |
| STELL ACCRESS | JUAN SICRAA V POI BOX 717 : /A GREENS DURG FC | . 0 11 | 4.2 NAME 4.3 STREE | LADDOFCO | POBLYTITHO | | | | | |
| DIT* \$1.7P | LORGENIC RULL EL | 72330 | | | GREENSBIRD FC | | | | | |
| | Cictory p | ☐ DELETE | 44 City - 5 1 Title | 51 · ZII' | Biete William 1 | - | 7 Chang | e 🗍 Addition | | |
| iAME | | | 5.2 NAME | | | L | | e [_] Addition | | |
| JIBEET AODRESS | | | 5.2 NAME | . ADDDECC | | | | | | |
| DIY ST-79 | | | 54 CITY- | | | | | | | |
| Hf. | · · · · · · · · · · · · · · · · · · · | ☐ DELETE | 6 1 TITLE | ar-ZIF | | г | Chang | e Addition | | |
| vest: | | | 6 2 NAME | | | | 9 | | | |
| STREET ADDRESS | | | 6 3 STREE | ADDRESS | | | | | | |
| (alt St Zar | | | 6.4 CITY - | | | | | | | |
| 14. Ldo hereb | certify that the information supplied v | with this filing is voluntarily fu | miched and doc | e not n | .I. ualify for the exemption stated in Section 119. | 07(3)(k). Flo | rida Sta | tutes. I further | | |
| oath; that I | tre recimation indicated on this annu | ai report or supplemental ar ration or the receiver or trust | inuai report is tr tee empowered | ie and a | accurate and that my signature shall have the te this report as required by Chapter 607, File | come lengt | attact a | aif made under | | |

SIGNATURE: SIMULIAN ROA EXCHISON

1/26/96 904-877-1124