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**Apr 01 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J50518 (6)
1. Corporation Name
SOUTHEAST PAINTING AND DECORATING, INC.



Principal Place of Business: % DANIEL J. STANNEY, 5180 49TH AVE., NORTH, ST. PETERSBURG FL 33709
Mailing Address: % DANIEL J. STANNEY, 5180 49TH AVE., NORTH, ST. PETERSBURG FL 33709-5918

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/29/1986	3a. Date of Last Report 03/25/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2780985	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
STANNEY, DANIEL J. 5180 49TH AVE., NORTH ST. PETERSBURG FL 33709		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85. Zip Code

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP LEGAULT, JOHN J. <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5180 49 AVE., NORTH	1.2 NAME	
STREET ADDRESS	ST. PETERSBURG FL	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	DST STANNEY, DANIEL J. <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5180 49 AVE., NORTH	2.2 NAME	
STREET ADDRESS	ST. PETERSBURG FL	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	DV PVIRRE, DONALD J. <input type="checkbox"/> DELETE	3.1 TITLE	President + Director <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	5180 49TH AV N	3.2 NAME	
STREET ADDRESS	ST PETERSBURG FL	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	Vice-President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	John Davis
STREET ADDRESS		4.3 STREET ADDRESS	5180 49th Avenue N
CITY - ST - ZIP		4.4 CITY - ST - ZIP	St Petersburg FL 33709
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *Daniel Stanney* DANIEL STANNEY 3/24/97
Date: _____ Daytime Phone: # _____

CR2E034 (9/96)