	PROFIT RPORATION		64		DEPARTMEN		· · · N	/lay 15	199	078	:00a
ANNI	UAL REPORT				Secretary of S	State		2			
	1997		DIVISION OF CORPORATIONS				Secretary of State				
	on Name	<16849		(7)	)						
DUTH	Eastern Indu	STRIAL PAIN	TING,	INC.				n handa mada allah mining 191	ı Attık ÖlÜN DI	All Albis Bidii I	10M 130 :
ipal Flace of Business Mailing Address LUE D. BILLINGSLEY JR % WILLIE D. BILLINGSLEY JR											
nset di			80 BUNSET DR #E W MELBOURNE FL 32904-5151								
							3. Date Inco 02/26/11	porated or Qualified		te of Last R	eport
incipal F	Place of Business			Mailing Addre	ess		4. FEI Numb	er		Ap	plied For
iite Apt.	. # oto.		26	Suite, Apt. #,	etc.	······	59-287	of Status Desired	121	\$8.75 /	t Applicable Idditional
ty & Sta			27	City & State				ampaign Financing	₩ <b>4</b> ,1	Fee Re \$5.00	- `
			28	-			Trust Fund	Contribution		Added I	o Fees
р	25	untry	29	Zip	30	Country	8. This corpo Florida St	pration has liability for atutes	r intangible X Yes		199.032,
ĐI I	9. Name and Ar LINGSLEY, WILLIE	dress of Current	t Regist	ered Agent		B1 Name	10. Name an	Address of New R	egistered A	Igent	
	O MAINE ST	U. JN							ble)		
h hitta						1 <b>62</b>   Street Ad		IMDELIS NOT ACCEDIA			
MEL	LBOURNE FL 3290	М				·		mber is Not Accepta		<del></del>	······
MEL		Η				83		imber is not Accepta		AS Zip (	Code
Pursuant	LBOURNE FL S200	Sections 607.0502	of Florid	Ia. Such chan	ge was autho	83 84 City the above-named c rized by the corpo	orporation submits	his statement for the	FL.	85 Zip ( changing it pintment as	s registered
fursuant office or agent 1 a	LBOURNE FL 3290	Sections 607.0502 bolh, in the State accept the obliga	of Florid ations of, nt and tric i	la. Such chan , Section 607.0 f applicable	ge was autho 0505, Ftorida (NOTE: Regi	83 84 City the above-named c rized by the corpo Statutes.	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it pintment as	s registered registered
fursuant office or agent 1 a	LBOURNE FL SEOC t to the provisions of registered agent, or and familiar with, and Stanline, typed or printed PD	Sections 607.0502 bolh, in the State of accept the obliga name of reported agen OFFICERS AND	of Florid ations of, nt and tric i	la. Such chan , Section 607.0 f applicable	ge was autho 0505, Florida (NOTE: Regi	83 84 City the above-named c rized by the corpo Statutes.	orporation submits oration's board of di aquired when reinstainon	his statement for the	FL purpose of ept the appo	changing it pintment as	s registered registered
<sup>1</sup> ursuant Ifice or gent 1 a ATURE	LBOURNE FL S200 t to the provisions of registered agent, or ann familiar with, and Signalize, lyped or priore PD BILLINGSLEY, V	Sections 607.0502 both, in the State of accept the obliga name of reps: erect ager OFFICERS AND VILLIE D. J	of Florid ations of, nt and tric i	la. Such chan , Section 607.0 (applicable TORS	ge was autho 0505, Florida (NOTE Regi	B3     B4 City     e above-named c     rized by the corpo     Statutes.      stered Agent signature re     13.     1.1 fift     1.2 NAME	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it pintment as	s registered registered S IN 12
ADORESS	LBOURNE FL S200 t to the provisions of registered agent, or ann familiar with, and Signalize, lyped or priore PD BILLINGSLEY, V	Sections 607,0502 both, in the State ( accept the obliga name of registered agen OFFICERS AND	of Florid ations of, nt and tric i	la. Such chan , Section 607.0 (applicable TORS	ge was autho 0505, Florida (NOTE Regi	B3     B4 City     e above-named c     rized by the corpo     Statutes.  stered Agent signature re 13.  1.1 IILE	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it pintment as	s registered registered S IN 12
ADORESS	LBOURNE FL S200 L to the provisions of registered agent, or and familiar with, and Stipnative, typed or printed PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD	Sections 607.0502 bolh, in the State ( accept the obliga name of repstered agen OFFICERS AND WILLIE D. J	of Florid ations of, nt and tric i	la. Such chan , Section 607.0 (applicable TORS	ge was autho 0505, Florida (NOTE Regi LETE	B3     B4 City     e above-named c     rized by the corpo     Statutes.     altered Agent signature re     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it ointment as DIRECTOR	s registered registered S IN 12
ADRESS	LBOURNE FL S200 to the provisions of registered agent, or and familiar with, and Stipnalize, typed or priored PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C	Sections 607.0502 bolh, in the State of accept the obliga ourne of registered agen OFFICERS AND WILLIE D. J	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 Happleable TORS	ge was autho 0505, Fiorida (NOTE: Rogi LETE	B3     B4 City     e above-named c     rized by the corpo     Statutes.  stered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it pintment as DIRECTOR	s registered registered S IN 12
ADRESS	LBOURNE FL S200 t to the provisions of registered agent, or and familiar with, and Standard upped or prime PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FL	Sections 607.0502 bolh, in the State of accept the obliga ourne of registered agen OFFICERS AND WILLIE D. J	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 TORS	ge was autho 0505, Florida (NOTE Regi LETE	B3         B4       City         He above-named crized by the corposite         Statutes.         Istered Agent signature re         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TIFLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP	orporation submits oration's board of di aquired when reinstainon	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing II changing II change DIRECTOR Change	s registered registered S IN 12 Addition
ADRESS	LBOURNE FL S200 t to the provisions of registered agent, or ant familiar with, and Standard Upped or piloted PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F	Sections 607.0502 both, in the State of accept the obliga owne of reported agen OFFICERS AND VILLIE D. J VILLIE D. J LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 Pappleable TORS	ge was autho 0505, Fiorida (NOTE Rogi LETE	B3         B4       City         He above-named crized by the corpo Statutes.         Istered Agent signature re         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TIFLE         2.2 NAME         2.3 STREET ADDRESS	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it pintment as DIRECTOR	s registered registered S IN 12
ADDRESS	LBOURNE FL S290 t to the provisions of registered agent, or an familiar with, and Stiphalize, typed or pilotec PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F 2240 MAINE ST	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 TORS	ge was autho 0505, Florida (NOTE Reg LETE	83         84       City         He above-named crized by the corpo Statutes.         Istered Agent signature re         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TIFLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TIFLE         3.2 NAME         3.3 STREET ADDRESS	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing II changing II change DIRECTOR Change	s registered registered S IN 12 Addition
ADDRESS	LBOURNE FL S200 t to the provisions of registered agent, or ant familiar with, and Standard Upped or piloted PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 TORS	ge was autho 0505, Florida (NOTE Rog LETE	83         84       City         rized by the corpo Statutes.         sitered Agent signature re         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TIFLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TIFLE         3.2 NAME	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing II changing II change DIRECTOR Change	s registered registered S IN 12 Addition
ADDRESS 1- ZIP	LEOURNE FL S200 Leo the provisions of registered agent, or and familiar with, and Stiphalide, typed or prime PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 Happleable TORS	ge was autho 0505, Fiorida (NOTE Reg LETE	83         84         City         e above-named c rized by the corpo Statutes.         istered Agent signature re 13.         11 TITLE         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         4.1 TITLE         4.2 NAME	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing It ointment as DIRECTOR Change	s registered registered S IN 12 Addition
ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	LEOURNE FL S200 Leo the provisions of registered agent, or and familiar with, and Stiphalide, typed or prime PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 Happleable TORS	ge was autho 0505, Fiorida (NOTE Regi LETE LETE	83         84         City         He above-named crized by the corpo Statutes.         Istered Agent signature re         13.         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 City-ST-ZIP         2.1 TIFLE         2.2 NAME         2.3 STREET ADDRESS         2.4 City-ST-ZIP         3.1 TIFLE         3.2 NAME         3.3 STREET ADDRESS         3.4 City-ST-ZIP         3.1 TIFLE         3.3 STREET ADDRESS         3.4 City-ST-ZIP         4.1 TIFLE	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing It ointment as DIRECTOR Change	s registered registered S IN 12 Addition
Pursuant office or agont 1 at URE ADORESS 51 - 20 ADORESS 51 - 20 ADORESS 51 - 20 ADORESS	LEOURNE FL S200 Leo the provisions of registered agent, or and familiar with, and Stiphalide, typed or prime PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, C 1801 ISLAND C INDIALANTIC FI ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 Happleable TORS	ge was autho 0505, Fiorida (NOTE Regi LETE LETE LETE	83         84         City         e above-named crized by the corpo Statutes.         stered Agent signature re         13.         14.         12.         NAME         1.3.         1.4.         1.3.         1.4.         1.3.         1.4.         1.3.         1.4.         1.3.         3.5.         1.4.         2.1.         1.1.         1.3.         3.3.         1.4.         2.1.         1.3.         2.4.         2.1.         1.1.         2.1.         1.1.         2.1.         1.1.         2.1.         1.1.         1.1.         2.1.         3.5.         2.4.         2.7.         3.1.         3.5.         2.1.         3.3.         CITY-ST-ZIP         3.1.         3.1.         3.3.         3.4.         CITY-	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	Changing It ointment as DIRECTOR Change	s registered registered S IN 12 Addition
<sup>1</sup> UTSUANT Alloce or agent 1 ADORESS 51 - 21P ADORESS 51 - 21P ADORESS 51 - 21P ADORESS 51 - 21P	LBOURNE FL S200 LIC the provisions of registered agent, or an familiar with, and Signalize, hyped or priotec PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, F 2240 MAINE ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 I applicable TORS	ge was autho 0505, Fiorida (NOTE Regi LETE LETE	83         84         City         e above-named crized by the corpo Statutes.         streed Agent signature re         13.         11 TITLE         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         4.1 TITLE         4.2 NAME         4.3 STREET ADDRESS         4.4 CITY-ST-ZIP	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it ointment as DIRECTOR Change	s registered registered S IN 12 Addition
<sup>1</sup> UTSUANT Iffice or Igent 1 ADORESS ADORESS SI - ZIP ADORESS SI - ZIP ADORESS SI - ZIP ADORESS SI - ZIP ADORESS SI - ZIP	LBOURNE FL S200 LIC the provisions of registered agent, or an familiar with, and Signalize, hyped or priotec PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, F 2240 MAINE ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 dappicable TORS	ge was autho 0505, Fiorida (NOTE Regi LETE LETE	B3         B4       City         re above-named crized by the corpostatutes.         istered Agent signature re         13         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         4.1 TITLE         4.2 NAME         4.3 STREET ADDRESS         3.4 CITY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         5.1 TITLE         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it changing it pintment as DIRECTOR Change Change Change Change Change Change Change	s registered registered S IN 12 Addition
<sup>a</sup> ursuant	LBOURNE FL S200 LIC the provisions of registered agent, or an familiar with, and Signalize, hyped or priotec PD BILLINGSLEY, V 2240 MAINE ST MELBOURNE FI VD BILLINGSLEY, F 2240 MAINE ST BILLINGSLEY, F 2240 MAINE ST MELBOURNE FI	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 I applicable TORS	ge was autho 0505, Fiorida LETE LETE LETE	B3         B4       City         e above-named crized by the corpo Statutes.         istered Agent signature re         13         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         4.1 TITLE         4.2 NAME         4.3 STREET ADDRESS         3.4 CITY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         5.3 STREET ADDRESS	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it ointment as DIRECTOR Change	s registered registered S IN 12 Addition
Pursuant office or agent 1 at URE ADORESS SE ZIP ADORESS SE ZIP ADORESS SE ZIP ADORESS SE ZIP	LBOURNE FL S200	Sections 607.0502 both, in the State of accept the obliga nume of reportend agen OFFICERS AND VILLIE D. J L DAVID LUB DR #85	of Florid ations of, nt and tric i	la. Such chan, Section 607.0 dappicable TORS	ge was autho 0505, Fiorida (NOTE Reg LETE LETE	B3         B4         City         e above-named crized by the corpo Statutes.         stered Agent signature re         13         1.1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CITY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CITY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CITY-ST-ZIP         4.1 TITLE         4.2 NAME         4.3 STREET ADDRESS         3.4 CITY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         5.1 TITLE         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         6.1 TITLE	orporation submits oration's board of di aquired when reinstailogi	his statement for the ectors. I hereby acce	FL purpose of ept the appo	changing it changing it pintment as DIRECTOR Change Change Change Change Change Change Change	s registered registered S IN 12 Addition