

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # K16849 (7)
 1. Corporation Name
SOUTHEASTERN INDUSTRIAL PAINTING, INC.



Principal Place of Business Mailing Address

% WILLIE D. BILLINGSLEY JR
60 SUNSET DR #E
W MELBOURNE FL 32904

% WILLIE D. BILLINGSLEY JR
60 SUNSET DR #E
W MELBOURNE FL 32904

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/26/1988

4. FEI Number
59-2876129

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
27 60 Sunset Dr. #E

2a. Mailing Address
26 60 Sunset Drive #E

22. City & State
23 West Melbourne, FL

27. City & State
28 West Melbourne, FL

24. Zip Country
29 32904 USA

30. Zip Country
30 32904 USA

9. Name and Address of Current Registered Agent

BILLINGSLEY, WILLIE D. JR
2240 MAINE ST
MELBOURNE FL 32904

10. Name and Address of New Registered Agent

81 Name Patricia Billingsley

82 Street Address (P.O. Box Number is Not Acceptable) 2240 Maine St.

84 City Melbourne FL 85 Zip Code 32904

11. Pursuant to the provisions of Sections 607.0507 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 607.0507, Florida Statutes.

SIGNATURE *Patricia Billingsley* **PATRICIA BILLINGSLEY, PRES. 6-1-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	President
NAME	BILLINGSLEY, WILLIE D. J	1.2 NAME	Billingsley, Patricia
STREET ADDRESS	2240 MAINE ST	1.3 STREET ADDRESS	2240 Maine St.
CITY-ST-ZIP	MELBOURNE FL	1.4 CITY-ST-ZIP	Melbourne, FL 32904
TITLE	ST	2.1 TITLE	Vice President
NAME	BILLINGSLEY, PATRICIA	2.2 NAME	Billingsley, Willie D. Jr
STREET ADDRESS	2240 MAINE ST	2.3 STREET ADDRESS	2240 Maine St.
CITY-ST-ZIP	MELBOURNE FL	2.4 CITY-ST-ZIP	Melbourne, FL 32904
TITLE		3.1 TITLE	Sec/Treas
NAME		3.2 NAME	Billingsley, Patricia
STREET ADDRESS		3.3 STREET ADDRESS	2240 Maine St.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Melbourne, FL 32904
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *Patricia Billingsley* **4-29-98 407-723-6070**

CR2E034 (10/97)