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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K36287

(6)

DAVID MOORMAN PAINTING, INC.

Principal Place of Business	Mailing Address	
% DAVID MOORMAN 1205 WHIPPORWILL LANE NAPLES FL 33999	% DAVID MOORMAN 1205 WHIPPORWILL LANE NAPLES FL 33999	

FILED
May 01 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1988

2. Principal P	IACE OF DUSINESS	za. Maling A	Address			4. PEI Number	[oplied For	
1		26	26			65-0091509 Not Appli			
Suite, Apt. #, etc.		Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	SA 75 Additional		
City & State	е	City & St	ate			6. Election Campaign Financing	\$5.00	May Be	
23. 28					Trust Fund Contribution				
Zip	Country	Zip		Country		8. This corporation owes or has paid			
24 25 29 30					Personal Property Tax due June 30. Yes No				
	9. Name and Address of Cu	irrent Registered Age	ent		•	10. Name and Address of New Regi	stered Agent		
MOORMAN, DAVID					81 Name				
1205 WHIPPORWILL LANE NAPLES FL 33999				82	82 Street Address (P.O. Box Number is Not Acceptable)				
				63					
				63					
					84 City 85 Zip Code				
							FL 63 Zip		
11. Pursuant	to the provisions of Sections 607	'.0502 and 607.1508, I State of Etorida, Such (Florida Statutes change was au	s, the above thorized by	e-named corp the corporat	oration submits this statement for the purion's board of directors. I hereby accept	pose of changing it the appointment as	s registered registered	
agent. I a	m familiar with, and accept the c	obligations of, Section	607.0505, Flori	da Statutes	i,	ion's board of directors. I hereby accept	, , , _ , , ,		
SIGNATURE									
	Signature, typed or printed name of registers		(NOTE	Registered Age	nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DO AND DIDECTOR	E IN 12	
TOLE		S AND DIRECTORS	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition	
	D/P	L.					Change		
NAME	MOORMAN, DAVID	-		1.2 NAME	.0000000				
STREET ADDRESS	1205 WHIPPORWILL LAN	<u> </u>		1.3 STREET	i				
CITY-ST-Z#P TITLE	NAPLES FL 33999	<u> </u>	DELETE	1.4 CITY-S 2.1 TITLE		J. D. A	Change	☐ Addition	
NAME	D/T	_	_ pecete	2.2 NAME	\	lice President		1.00.000	
	Moorman, Mardis 1205 Whipporwill Lani	E		2.2 NAME 2.3 STREET	4000000		THE		
STREET ADDRESS	NAPLES FL 33999	-		2.4 CITY - S	1				
CITY-ST-ZIP TITLE	S		DELETE	3.1 TITLE		N	Change	Addition	
NAME	MIR. SERMAD	_		3.2 NAME	1), rector	<i>- u</i>		
STREET ADDRESS	4081 NORTHLIGHT DR.			3.3 STREET	ADORESS				
CITY-ST-ZIP	NAPLES FL			3.4. CITY-S	1				
TITLE	VP		DELETE	4.1 TITLE			Change	☐ Addition	
NAME	HEIMER, TROY L	•		4.2 NAME			•		
STREET ADDRESS	261 12 ST SE			4.3 STREET	ADORESS				
CITY-ST-ZIP	NAPLES FL 33999			4.4 CITY - S					
TITLE			DELETE	5.1 TITLE			Change	Addition	
NAME				5.2 NAME	ł				
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY-S	4				
TITLE		[DELETE	6.1 TITLE			☐ Change	Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S					
	certify that the information suppli								

4. I hereby certify that the information supplied with this filing does not equify for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is trief 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 employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ehanged, or on an attachment with an addition.

SIGNATURE:

4-10-98

941-263 8899