

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L95750

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: OLYMPUS PAINTING CONTRACTORS, INC.

**Current Principal Place of Business:**

556 ANCLOTE RD  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

556 ANCLOTE RD  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

FEI Number: 59-3030434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KERDEMELIDIS, KOSTAS  
1022 EAST LIME ST.  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAVROMATIS, NICHOLAS  
Address: 4989 CARDINAL TRAIL  
City-St-Zip: TARPON SPRINGS, FL 34684

Title: VP ( ) Delete  
Name: MAVROMATIS, LEON  
Address: 4989 CARDINAL TRAIL  
City-St-Zip: TARPON SPRINGS, FL 34684

Title: S ( ) Delete  
Name: KERDEMELIDIS, KOSTAS  
Address: 1022 EAST LIME ST.  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS MAVROMATIS

P

01/05/2006

Electronic Signature of Signing Officer or Director

Date