2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M56229

Entity Name

MASTER PAINTERS - PAUL ROORDA, INC.



FILED Feb 06, 2008 08:00 AN Secretary of State

Principal Place of Business

C/O PAUL ROORDA III PO BOX 1141

JUPITER, FL 33468 US

Mailing Address

C/O PAUL ROORDA III 15700 75TH AVE

PALM BEACH GARDENS, FL 33410

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2840527

02012008

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

ROORDA, PAUL III 15700 75TH AVE PALM BEACH GARDENS, FL 33418

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NUMBER PER 18 3 180		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZiP	P ROORDA, PAUL III 15700 75 AVE. PALM BEACH GARDENS, FL 33418		U00000817814		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV ROORDA, PAUL JR. 200 OCEAN TRAIL WAY #401 JUPITER, FL 33477				02/15/08-80016-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROORDA, IRENE 15700 75 AVE. PALM BEACH GARDENS, FL 33418			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROORDA, RUTH 200 OCEAN TRAIL WAY #401 JUPITER, FL 33477			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROORDA, THEODORE 200 OCEAN TRAIL WAY #401 JUPITER, FL 33477				
NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 4

BIGHATURE AND TYPED OR PRINTED HAME OF BIGHING OFFICER OR DIRECTOR

2/1/08

541:747-2461