

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001192

Entity Name: CARLISLE CUSTOM PAINTING, INC.

FILED  
Jan 13, 2005  
Secretary of State

## Current Principal Place of Business:

12016 BAYTREE DRIVE  
RIVERVIEW, FL 33569

## New Principal Place of Business:

6409 CLAIR SHORE DRIVE  
APOLLO BEACH, FL 33572

## Current Mailing Address:

12016 BAYTREE DRIVE  
RIVERVIEW, FL 33569

## New Mailing Address:

6409 CLAIR SHORE DRIVE  
APOLLO BEACH, FL 33572

FEI Number: 59-3614668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCGOWAN, TEDDI  
116 ISLAND WATER WAY  
APOLLO BEACH, FL 33572 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: PRES ( ) Delete  
Name: CARLISLE, STEVEN L  
Address: 12016 BAYTREE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: CFO ( ) Delete  
Name: CARLISLE, SHARON R  
Address: 12016 BAYTREE DR  
City-St-Zip: RIVERVIEW, FL 33569

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CARLISLE, STEVEN L  
Address: 6409 CLAIR SHORE DRIVE  
City-St-Zip: APOLLO BEACH, FL 33572

Title: CFO (X) Change ( ) Addition  
Name: CARLISLE, SHARON R  
Address: 6409 CLAIR SHORE DRIVE  
City-St-Zip: APOLLO BEACH, FL 33572

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON R. CARLISLE

CFO

01/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date