

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001192

FILED
Feb 11, 2009
Secretary of State

Entity Name: CARLISLE CUSTOM PAINTING, INC.

Current Principal Place of Business:

9803 GINGER DRIVE
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

9803 GINGER DRIVE
RIVERVIEW, FL 33578

New Mailing Address:

FEI Number: 59-3614668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERVIEW TAX & MORTGAGE, INC.
7039 US HWY 301 SOUTH
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

CARLISLE, SHARON R
9803 GINGER DRIVE
RIVERVIEW, FL 33578 US

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: SHARON R. CARLISLE

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CARLISLE, STEVEN L
Address: 9803 GINGER DRIVE
City-St-Zip: RIVERVIEW, FL 33578

Title: CFO () Delete
Name: CARLISLE, SHARON R
Address: 9803 GINGER DRIVE
City-St-Zip: RIVERVIEW, FL 33578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SHARON R. CARLISLE

CFO

02/11/2009

Electronic Signature of Signing Officer or Director

Date