200°	1 UNIFORM BUS	SINESS REPOR	PT /I	IRP)	APPROVED S/S		
<del></del>	MENT # P000000120		×1 (	<u> </u>	可能的 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
		,		ſ	O JUL 15 Live		
SUN COA	TINGS PAINT CENT	ERS, INC.			SECRETARY OF STATE SECRETARY OF STATE STLAHASSEE, FLORIDA		
,	ce of Business	Mailing Address			SECHELAGGEE, FLUME		
12295 75th Largo, FL	h Street North 33773	12295 75th Street Largo, FL 33773	North	-			
2. Principal P	lace of Business	3. Mailing Address		· · · · · ·			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State	e	City & State	City & State		4. FEI Number Applied For		
Zip	Country	Zip	Cou	intry	5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Curre	nt Registered Agent			7. Name and Address of New Registered Agent		
				Name	,		
Sean W. P	oole		Ī	Street Addres	ss (P.O. Box Number is Not Acceptable)		
12295 75tl		1					
Largo, FL	33773	-	ŀ	City FL Zip Code			
8. The above	named entity submits this statem	ent for the purpose of changing	its regi	stered office or	registered agent, or both, in the State of Florida.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
	ration is eligible to satisfy its Intane equirement and elects to do so. ia on back)	gible FILE NOW! After MAY 1, 20 Make Check Payabi	1 Fee	IS \$150.00 ∰ will be \$550.0	00 State Trust Fund Contribution. \$5.00 May Be		
11.	OFFICERS ANI	<del></del>	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change Addition		
TITLE NAME	Raymond T. Hyer, Jr.	Delete	TITLE NAME	l l	Change Addition		
STREET ADORESS CITY - ST - ZIP	12295 75th Street Nort Largo, FL 33773	h		ET ADDRESS ST - ZIP	CR2EC		
TITLE	D/V	Delete Delete	TITLE	1	Change Addition		
NAME STREET ADDRESS	Robert P. Hickey 12295 75th Street Nort	ħ	NAME	ET ADDRESS	00000448氢846倍一旬 -07/18/0101012005		
CITY - ST - ZIP	Largo, FL 33773		CITY -	ST - ZIP	****150.00 ****150.00		
TITLE NAME	D/S/T  Sean W. Poole	Delete	TITLE NAME		Change Addition		
STREET ADDRESS	12295 75th Street Nort	h	•	ET ADDRESS			
CITY - ST - ZIP	Largo, FL 33773		CITY -	ST - ZIP			
TITLE: NAME		Delete	. TITLE		Change Addition		
STREET ADDRESS City - St - Zip			STRE	ET ADDRESS - ST - ZIP			
TITLE		Delete	TITLE		Change Addition		
NAME STREET ADDRESS			NAME				
CITY - ST - ZIP				ET ADDRESS - ST - ZIP			
TITLE		Delete	TITLE		Change Addition		
NAME STREET ADDRESS			NAME	ET ADDRESS			
CITY - ST - ZIP				· ST · ZIP	111.W		
information officer or di	indicated on this report or supple	emental report is true and accu ceiver or trustee empowered to	rate and execute	that my signate this report as	d in Section 119.07(3)(i), Florida Statutes. I further certify that the ure shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears ered.		
SIGNAT		Sea LED OR PRINTED NAME OF SIGN		Poole, Sec			

CCRS 103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT: CINDY	HICKS				
DATE:	7-12-01				
REF. #:	0672.17317				
CORP. NAME: SU	N COATINGS PAIN	Ť			
·	CENTERS, INC.				
( ) ARTICLES OF INCORPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION			
(X) ANNUAL REPORT	( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME			
( ) FOREIGN QUALIFICATION	( ) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY			
( ) REINSTATEMENT	( ) MERGER	( ) WITHDRAWAL			
( ) CERTIFICATE OF CANCELLATI	ON ( ) UCC-1	( ) UCC-3			
( ) OTHER:					
STATE FEES PREPAID	WITH CHECK# 15796 FO	OR \$ 150.00			
<b>AUTHORIZATION FOR</b>	ACCOUNT IF TO BE DEBIT	ED:			
·	COST LI	MIT: \$			
PLEASE RETURN:					
( ) CERTIFIED COPY (	) CERTIFICATE OF GOOD STANDING	(V)PLAIN STAMPED COP			
( ) CERTIFICATE OF STATUS	,	N 25 CO			
Examiner's Initials					



12290 73rd Court North Largo, FL 33773 727-531-4100 1-800-247-9691 FAX: 727-535-7750

July - 8, 2001

Florida Secretary of State Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re: 2001 Uniform Business Report

Dear Madam or Sir:

Please consider our request to waive the \$400 late charge imposed for remitting the supplemental corporate fee after May 1. We did not receive the Uniform Business Report form.

SUN COATINGS PAINT CENTERS, INC., a Florida corporation

By:

Sean W. Poole, Secretary