2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 28, 2006 08:00 AM Secretary of State

DOCUMENT # P0000063828 1. Entity Name JERRY AUSTIN PAINTING CONTRACTOR, INC.				Secretary of State	
Principal Place of Business 6621 W. GULF TO LAKE HWY UNIT #3 CRYSTAL RIVER, FL 34429 Malling Address PO 80X 557 HOMOSASSA, FL 34487-0557				1 (118) 54 ()	k BUIN BEIN BERN BERN BERN BERN BERN BENG BUNG HOEF KOM WEEL WANGER IK KEU
DO NOT WRITE IN THIS SPACE				01102008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 59-3656357 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					
AUSTIN, JERRY 6621 W. GULF TO LAKE HWY UNIT #3 CRYSTAL RIVER, FL 34429		DO NOT WRITE IN THIS SPACE			
2. 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 egistered agent.					
SIGNATURE Significe, typed granting name of registered agent and title it applicable (NOTE. Registered Agent signature required when reinstating) Oute					
FILE NOWILL FEE IS \$150.00 \$. Election Compaign Financing \$5.0 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				.00 May Be ed to Fees	
10.	OFFICERS AND DIREC	TORS	[
TITLE NAME STREET ADDRESS CITY -ST-ZIP	D AUSTIN, JERRY PO BOX 557 HOMOSASSA, FL 344870557				
TITLE NAME STREET ADORESS CITY-ST-ZIP					U00000450 76 2 03/10/06-80019-010 150.00
Title Name Street address City-St-21P				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY -ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME SIREET ADDRESS CITY-SI-ZIP					
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					