2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2005 8:00 am Secretary of State 04-26-2005 90160 047 ***150.00

DOCUMENT # P0000079292 1. Entity Name R. CURTIS MOORE PAINTING INC.					411	บบ • • •	90160 04	/ ****130.	.00	
Principal Place	e of Business	Mailing Address			40					
8427 THREE CREEKS BLVD 8427 THREE CREEKS BLVD										
JACKSONVILL	0	1								
					1 102 (102 (11)	CDIN ASIII BESI BEIII SI	IN 8881 IBBIG 181		TDI (6 1886)	
2 Principal P	lace of Business	3. Mailing Address								
4101	T BLOWNT AVC	4617 BIC	ounT/	tuc	familiant 111	NATILI KODIN MBINI NYKII MI		TH ELDYN HAGTA FRAT	1881 () LEE	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>		04222005	Chg-P	CBSEO	34 (10/03)		
City & State	Esonuille, Fl.	State Sonuil	10. H		4. FEI Numbe 59-3670				plied For t Applicable	
Zio Zio	Country		Country					\$8.75 Add		
3221	0 1	32210			5. Certificate	of Status Desired		Fee Required	i —	
	6. Name and Address of Current Re	gistered Agent			7. Name and	Address of New	Registered A	gent		
	· · · · · · · · · · · · · · · · · · ·		Name 7	204	ort C	1400	O.P		İ	
MOORE, R. CURTIS				Name Robert C Moore Street Address (P.Q.Box Number is Not Acceptable)						
8427 THREE CREEKS BLVD JACKSONVILLE, FL 32220				17	Blow	OT AVY	<u> </u>			
									1	
			Сфу	./ 6	00011	<u> </u>	FL	Zin Code	-	
8 The above	named entity submits this statement for the	ne ournose of changing its re	distared office or	register	ed agent, or bot	h in the State of F		amılıar witn.	and accept	
	ions of registered agent.		9 - 1 - 1 - 1			.,,				
SIGNATURE -										
SIGNATURE-	Signature, typed or printed name of registered agent and	title il applicable. (NOTE: R	legistered Agent signatu	ve required	when reinstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaigr Trust Fund Contrib		\$5. Adde	00 May Be ed to Fees	,				
After Ma	ay 1, 2005 Fee will be \$550.00	Trust Fund Contrib		\$5. Adde		CHANGES TO OF	FICERS AND	DIRECTORS	5 IN 11	
		Trust Fund Contrib	oution.	\$5. Adde		CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
After Ma	ay 1, 2005 Fee will be \$550.00 OFFICERS AND DI	Trust Fund Contrib	11.	P	ADDITIONS/					
After Ma 10. TITLE NAME STREET ADDRESS	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. IIILE NAME STREET ADDRESS	PRO	ADDITIONS/	CHANGES TO OF				
After Ma 10. TITLE NAME	OFFICERS AND DI P MOORE, ROBERT C	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP	P	ADDITIONS/			□ Change	□ Addition	
After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PRO	ADDITIONS/					
After Ma	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP	PRO	ADDITIONS/			□ Change	□ Addition	
After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	PRO	ADDITIONS/			□ Change	□ Addition	
After Ma 10. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS	PRO	ADDITIONS/			□ Change	□ Addition	
After Ma 10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRO	ADDITIONS/			Change	Addition	
After Ma	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS	PRO	ADDITIONS/			Change	Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP CONTACTOR OF THE CONTACTOR O	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRO	ADDITIONS/			Change	Addition Addition	
After Ma 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IFFLE NAME STREET ADDRESS CITY-ST-ZIP IFFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PRO	ADDITIONS/			Change	Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE NAME	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRO	ADDITIONS/			Change	Addition Addition	
After Ma 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PRO	ADDITIONS/			Change	Addition Addition	
After M: 10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	PRO	ADDITIONS/			Change	Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE	Trust Fund Contrib RECTORS Delete Delete Delete	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILE NAME STREET ADDRESS	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib RECTORS Delete Delete Delete	11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 'CITY-ST-ZIP TITLE NAME STREET ADDRESS 'CITY-ST-ZIP TITLE NAME STREET ADDRESS	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-S1-ZIP	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib RECTORS Delete Delete Delete Delete	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP TITLE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib RECTORS Delete Delete Delete	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib RECTORS Delete Delete Delete Delete	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition Addition	
After M: 10. IIILE NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP TITLE	OFFICERS AND DI P MOORE, ROBERT C 4617 BLOUNT AVE JACKSONVILLE, FL 32210	Trust Fund Contrib RECTORS Delete Delete Delete Delete	11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PRO	ADDITIONS/			Change Change Change	Addition Addition Addition Addition	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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.