

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109720

FILED
Apr 10, 2008
Secretary of State

Entity Name: LACLE AUTO PAINTING INC.

Current Principal Place of Business:

4221 HWY 98 W.
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

6905 THOMAS DR.
UNIT 508
PANAMA CITY, FL 32408

New Mailing Address:

FEI Number: 58-2586148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACLE, BRUCE
6905 THOMAS DR. UNIT 508
PANAMA CITY, FL 32408 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: D () Delete
Name: LACLE, BRUCE PRES
Address: 6905 THOMAS DR. UNIT 508
City-St-Zip: PANAMA CITY, FL 32408

Title: ST () Delete
Name: LACLE, MARILYN SEC/TRS
Address: 6905 THOMAS DR. UNIT 508
City-St-Zip: PANAMA CITY, FL 32408

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: BRUCE LACLE

PRES

04/10/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date