

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000015148

Entity Name: BRIAN'S PAINTING INC.

**FILED**  
**Dec 22, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

7650 SOUTH TAMIAMI TRAIL  
5  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

7650 SOUTH TAMIAMI TRAIL  
5  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 65-1081525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RILEY, SARA M  
4564 W ROBIN HOOD TRAIL  
SARASOTA, FL 34232 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: SARA RILEY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: MOFFITT, BRIAN  
Address: 5641 BIDWELL PKWY APT 101  
City-St-Zip: SARASOTA, FL 34233

Title: STD ( ) Delete  
Name: MOFFETT, JOSHUA  
Address: 3717 SPAINWOOD  
City-St-Zip: SARASOTA, FL 34237

Title: PD ( ) Delete  
Name: RILEY, SARA M  
Address: 4564 W ROBIN HOOD TRAIL  
City-St-Zip: SARASOTA, FL 34232

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SARA RILEY

Electronic Signature of Signing Officer or Director

PRES

12/22/2009

Date