

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91483 016 ***150.00

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DOCUMENT # P01000016595

1. Entity Name
FINISH IT WITH PAINT, INC.



Principal Place of Business
**13610 LEARNING CT.
FT. MYERS FL 33919**

Mailing Address
**13300 S. CLEVELAND AVE.
SUITE 56 #615
FORT MYERS FL 33907**



2. Principal Place of Business

3. Mailing Address

13300 S. CLEVELAND AVE

SUITE 56 #615

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 56 #615

City & State

City & State

FT. MYERS FL

Zip

Country

Zip

Country

33919

USA

4. FEI Number **65-1090080**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILEY, JULIE
13610 LEARNING CT.
FT. MYERS FL 33919**

Name

WILEY, Julie

Street Address (P.O. Box Number is Not Acceptable)

1080 Leasing DR. Apt. 6

City

Merritt Island

FL

Zip Code

32953

8. 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 registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **WILEY, WAYNE C**
STREET ADDRESS **13610 LEARNING CT.**
CITY-ST-ZIP **FT. MYERS FL 33919**

TITLE **PD** ☒ Change ☐ Addition
NAME **WILEY, WAYNE C**
STREET ADDRESS **13300-56 S. CLEVELAND AVE.**
CITY-ST-ZIP **FT. MYERS FL 33907**

TITLE **V** ☐ Delete
NAME **WILEY, JULIE**
STREET ADDRESS **13300-56 S. CLEVELAND**
CITY-ST-ZIP **FORT MYERS FL 33907**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne C Wiley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/03 **872-5176**
Date Daytime Phone #

CR2E034 (10/02)