

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000079396**

1. Entity Name  
**T & S PAINTING OF CENTRAL FLORIDA, INC.**



Principal Place of Business  
**3541 NE 59TH AVENUE  
SILVER SPRINGS, FL 34488**

Mailing Address  
**PO BOX 1869  
INVERNESS, FL 34451**



03122008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0460816**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**KERSWILL, SAMUEL H  
3691 NE 59TH AVENUE  
SILVER SPRINGS, FL 34488**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	KERSWILL, SAMUEL H
STREET ADDRESS	3691 NE 59TH AVENUE
CITY-ST-ZIP	SILVER SPRINGS, FL 34488
TITLE	D
NAME	PROUTY, TERRY
STREET ADDRESS	3541 NE 59TH AVENUE
CITY-ST-ZIP	SILVER SPRINGS, FL 34488
TITLE	D
NAME	BARNES, DAVID
STREET ADDRESS	P.O. BOX 877
CITY-ST-ZIP	FT. MCCOY, FL 32134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000933448  
05/22/08-80095-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Terry Prouty  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 4-16-08  
Date Daytime Phone #