2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007
Secretary of State

DOCUMENT# P01000104867

Entity Name: PEABODY PAINTING & WATERPROOFING, INC.

Current Principal Place of Business:

P.O. BOX 1508
BOCA RATON, FL 33429

New Principal Place of Business:

1305 NE 4TH AVE
BOCA RATON, FL 33432

Current Mailing Address:

8001 VINE CREST AVE
SUITE #5
LOUISVILLE, KY 40222

New Mailing Address:

FEI Number: 65-1148810 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITHER, KEVIN S
1305 NE 4TH AVE
BOCA RATON, FL 33432 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: DP ( ) Delete
Name: SMITHER, KEVIN S
Address: P.O. BOX 1508
City-St-Zip: BOCA RATON, FL 33429

Title: ST ( ) Delete
Name: CRIPE, ROBERT A
Address: 8001 VINE CREST AVE
City-St-Zip: LOUISVILLE, KY 40222

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: SMITHER, JOHN B
Address: 8001 VINE CREST AVE
City-St-Zip: LOUISVILLE, KY 40222

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT A. CRIPE ST 01/08/2007

Electronic Signature of Signing Officer or Director — Date