

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000022950

Entity Name: KOHNE PAINTING, INC.

FILED  
Jan 12, 2004  
Secretary of State

**Current Principal Place of Business:**

7349 CLARIES DRIVE  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

7349 CLARIES DRIVE  
SARASOTA, FL 34243

**New Mailing Address:**

FEI Number: 01-0646017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARNES, GARRET T ESQ.  
3119 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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: P ( ) Delete  
Name: KOHNE, TOM  
Address: 7349 CLARIES  
City-St-Zip: SARASOTA, FL 34243

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

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

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

Title: V ( ) Change (X) Addition  
Name: BOYD, LYNN  
Address: 5020 23RD STREET EAST  
City-St-Zip: BRADENTON, FL 34203

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TOM KOHNE

P

01/12/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date