

2008 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P02000042689

1. Entity Name
EASTMAN PAINTING INC.



Principal Place of Business
**2516 NE ELAINE ST
JENSEN BCH, FL 34957**

Mailing Address
**2516 NE ELAINE ST
JENSEN BCH, FL 34957**



DO NOT WRITE IN THIS SPACE

03242008 No Chg-P CR2E034 (11/05)

4. FEI Number
01-0607459

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**EASTMAN, JEREMY T
2516 NE ELAINE ST
JENSEN BCH, FL 34957**

**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

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

(NOTE: Registered Agent signature required when reinstating)

05/22/08-80083-011 150.00

**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	PD
NAME	EASTMAN, JEREMY
STREET ADDRESS	2516 NE ELAINE ST.
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	VP
NAME	PETERS, KIRK
STREET ADDRESS	2516 NE ELAINE ST
CITY-ST-ZIP	JENSEN BCH, FL 34957
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/08

Date

772-486-0186

Daytime Phone #