

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P02000095444

1. Entity Name  
SPACE AGE COATING CONCEPTS, INC.



Principal Place of Business  
2710 SOUTH ORLANDO DRIVE #1  
SANFORD, FL 32773

Mailing Address  
2710 SOUTH ORLANDO DRIVE #1  
SANFORD, FL 32773

**FILED**  
**Aug 28, 2007 08:00 AM**  
**Secretary of State**



08062007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
27-0027273

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

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

LEROUX, R M  
507A HERBERT STREET  
PORT ORANGE, FL 32129-3845

**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)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PCEO  
MULKEY, JERRY E  
2710 SOUTH ORLANDO DRIVE #1  
SANFORD, FL 327735353

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VPS  
WILFONG, BILLY E  
2710 SOUTH ORLANDO DRIVE #1  
SANFORD, FL 327735353

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

U00000772880  
08/28/07-80007-016 150.00

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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:

*Jerry E. Mulkey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/10/07

407-314-8549  
Daytime Phone #