2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 17, 2005
Secretary of State

DOCUMENT# P02000115449

Entity Name: SARASOTA SPRAYMASTERS, INC.

Current Principal Place of Business:

6536 JARVIS ROAD
SARASOTA, FL 34241

New Principal Place of Business:

Current Mailing Address:

6536 JARVIS ROAD
SARASOTA, FL 34241

New Mailing Address:

FEI Number: 57-1153616 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAYLOR, SIMON
6536 JARVIS ROAD
SARASOTA, FL 34241 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TAYLOR, SIMON
Address: 6536 JARVIS ROAD
City-St-Zip: SARASOTA, FL 34241

Title: S, T ( ) Delete
Name: TAYLOR, CINDY
Address: 6536 JARVIS ROAD
City-St-Zip: SARASOTA, FL 34241

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: BARRY, JAMES A
Address: 6536 JARVIS ROAD
City-St-Zip: SARASOTA, FL 34241

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: SIMON N. TAYLOR P 08/17/2005

Electronic Signature of Signing Officer or Director Date