

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000158

FILED  
Jul 17, 2007  
Secretary of State

Entity Name: EXTREME SERVICE PAINTING, INC.

## Current Principal Place of Business:

12712 #B BALM RIVERVIEW RD.  
RIVERVIEW, FL 33569

## New Principal Place of Business:

## Current Mailing Address:

12712 #B BALM RIVERVIEW RD.  
RIVERVIEW, FL 33569

## New Mailing Address:

FEI Number: 04-3734616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, KENNETH M  
12712 #B BALM RIVERVIEW RD  
RIVERVIEW, FL 33569 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

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SMITH, KENNETH M  
Address: 12712 #B BALM RIVERVIEW RD.  
City-St-Zip: RIVERVIEW, FL 33569

Title: VPT ( ) Delete  
Name: SMITH, JULIE R  
Address: 12712 #B BALM RIVERVIEW RD.  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: MILLER, AMANDA  
Address: 12712 #B BALM RIVERVIEW RD.  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: STICH, SCHANTELL  
Address: 4625 SWINDELL ROAD  
City-St-Zip: LAKE LAND, FL 33810

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: KENNETH SMITH

PD

07/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date