

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008856

FILED  
Jun 18, 2010  
Secretary of State

Entity Name: SL PAINTING, INC.

**Current Principal Place of Business:**

1605 TALPECO RD.  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

1605 TALPECO RD.  
TALLAHASSEE, FL 32303

**New Mailing Address:**

FEI Number: 11-3675951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LITTLEFIELD, SAMUEL Q  
1605 TALPECO RD.  
TALLAHASSEE, FL 32303 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: PD  
Name: LITTLEFIELD, SAMUEL  
Address: 1605 TALPECO RD.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S  
Name: OLSON, COURTNEY  
Address: 1605 TALPECO RD.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: V  
Name: LITTLEFIELD, ALEX D  
Address: 1605 TALPECO RD.  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL Q LITTLEFIELD

PD

06/18/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date