

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074316

FILED
Apr 27, 2009
Secretary of State

Entity Name: CURTIS REMODELING & PAINT INCORPORATED

Current Principal Place of Business:

11 ROUNDABEND ROAD
SHALIMAR, FL 325792127

New Principal Place of Business:

Current Mailing Address:

11 ROUNDABEND ROAD
SHALIMAR, FL 325792127

New Mailing Address:

FEI Number: 80-0130739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKMAN, JAMES A
220 GOVERNMENT STREET
SUITE 1
NICEVILLE, FL 32578 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CURTIS, CHESTER L
Address: 11 ROUNDABEND RD.
City-St-Zip: SHALIMAR, FL 325792127 US

Title: V () Delete
Name: CURTIS, ERIC
Address: 707 FAIRVIEW DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DIR () Delete
Name: RICE, DONALD
Address: 610 LEE AVENUE
City-St-Zip: CRESTVIEW, FL 32539 US

Title: T () Delete
Name: HICKMAN, JAMES A
Address: 220 GOVERNMENT ST STE 1
City-St-Zip: NICEVILLE, FL 32578 US

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: CHESTER L CURTIS

P

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date