2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Aug 16, 2005 8:00 am Secretary of State **DOCUMENT # P03000075640** 1. Entity Name 1 06-20-2005 90001 031 ***158.75 RICHARD C. CALHOUN PAINTING, INC. 08-16-2005 90040 045 ***391.25 Principal Place of Business Mailing Address 2928 MAJESTIC OAKS LN GREEN COVE SPRINGS FL 32043 2928 MAJESTIC OAKS LN GREEN COVE SPRINGS FL 32043 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-3728360 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLOOMER, GEORGE M III Street Address (P.O. Box Number is Not Acceptable) 4429 CR 218 W MIDDELBURG FL 32068 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of regishered egent and title it applicable DATE FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Feet Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Defeta TATLE Chance ☐ Addition CALHOUN, RICHARD C NAME NAME STREET ADDRESS 5321 CHICORY CIR STREET ADDRESS CITY-ST-ZIP MIDDELBURG FL 32068 CITY-ST-ZIP DILE HILE ☐ Delete ☐ Change ☐ Addition WHITEHEAD, REBECCA M NAME NAME STREET ADDRESS 5321 CHICORY CIR STREET ADDRESS MIDDELBURG FL 32068 CITY-ST-71P CHY-SI-7P TITLE ☐ Delete ☐ Change ■ Addition STABLE 124145 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-57-79 TETLE ☐ Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-20 Oelsta TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Delete TIFLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered. ichard C. Calhoun



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

June 21, 2005

RICHARD C. CALHOUN PAINTING, INC. 2928 MAJESTIC OAKS LN **GREEN COVE SPRINGS, FL 32043**

Subject: RICHARD C. CALHOUN PAINTING, INC.

Reference Number:

P03000075640

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$391.25.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/mg

ANNUAL REPORTS SECTION