


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State

09-06-2005 90137 003 ***150.00

DOCUMENT # P03000079163		
1. Entity Name COLOUR INCORPORATED		

Principal Place of Business 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789	Mailing Address 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789
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50065149



2. Principal Place of Business 1211 ORANGE AVE Suite, Apt. #, etc. STE 300 City & State WINTER PARK, FL Zip 32789-4966 Country USA		3. Mailing Address 1211 ORANGE AVE Suite, Apt. #, etc. STE 300 City & State WINTER PARK, FL Zip 32789-4966 Country USA	
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07052005 Chg-P CR2E034 (10/03)

4. FEI Number 20-0095927		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent NEUBAUER, KIM 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789		7. Name and Address of New Registered Agent Name BYRD, RAE Street Address (P.O. Box Number is Not Acceptable) 1211 ORANGE AVE STE 300 City WINTER PARK FL Zip Code 32789-4966

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEUBAUER, KIM 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BYRD, RAE 1211 ORANGE AVE STE 300 WINTER PARK, FL 32789-4966 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BYRD, RAE 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC BYRD, RAE 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES NEUBAUER, KIM 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR NEUBAUER, KIM 2703 PHILLIPS PARK CT. WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #