

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083697

FILED
Apr 29, 2008
Secretary of State

Entity Name: RICK VACHA EXCEPTIONAL WALL FINISHES, INC.

Current Principal Place of Business:

5419 SW 21ST PLACE
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

5419 SW 21ST PLACE
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 56-2377964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VACHA, RICHARD A
5419 SW 21ST PLACE
CAPE CORAL, FL 33914 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: VACHA, RICHARD A
Address: 5419 SW 21 ST PLACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP () Delete
Name: WOODMAN, JULIE L
Address: 1555 BLUE POINT AVE #3
City-St-Zip: NAPLES, FL 34102 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WOODMAN, JULIE L
Address: 1969 CLARK CT UNIT #2
City-St-Zip: NAPLES, FL 34112 US

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: RICHARD A VACHA

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date