

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000097089

1. Entity Name
DAVID HENDRIX PAINTING INC.



FILED

04 SEP -8 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309

Mailing Address
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309

2. Principal Place of Business
2305 Killearn Ctr. Blvd.

3. Mailing Address

Suite, Apt. #, etc.
A-1

Suite, Apt. #, etc.

City & State
Tall FLA.

City & State

Zip
32309

Country
Leon

Zip

Country

08112004

Chg-P

CR2E034 (10/03)

MRB

FEI Number
20-0455286

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HENDRIX, DAVID L
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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 8, 2004

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
HENDRIX, DAVID L
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100041129331
09/17/04--01076--020 **150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BURGESS, DANIEL
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
GREEN, TERRILL
2305 KILLEARN CTR. BLVD. #A-1
TALLAHASSEE, FL 32309 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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: *David L Hendrix*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-04

Date

284-6854

Daytime Phone #