2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109515

Entity Name: GENESIS PAINTING LIMITED INC.

(X) Delete

WATKINS, ERVIN JR

147 STEWART STREET

ST. AUGUSTINE, FL 32084

Title:

Name:

Address:

City-St-Zip:

FILED Feb 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 147 STEWART STREET ST. AUGUSTINE, FL 32084 **Current Mailing Address: New Mailing Address:** 147 STEWART STREET ST. AUGUSTINE, FL 32084 FEI Number: 73-1681402 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREENE, ERIC J SR ALL FLORIDA FIRM INC 465 S VOLUSIA AVE 147 STEWART STREET ST. AUGUSTINE, FL 32084 US SUITE C ORANGE CITY, FL 32763 US 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: JAMISON MARK JESSUP SR 02/10/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GREENE, ERIC J SR Name: Name: 147 STEWART STREET Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32084 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: GREENE, SHARON L Name: GREENE, SHARON L 147 STEWART STREET 147 STEWART STREET Address: Address: ST. AUGUSTINE, FL 32084 City-St-Zip: City-St-Zip: ST. AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ERIC J GREENE SR **PRES** 02/10/2007

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.

() Change () Addition