## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## **DOCUMENT # P03000111667**

1. Entity Name

EZRA SWEENEY PAINT COMPANY

EZNA SW	VELINET FAINT COMPAINT			7		
Principal Place of Business		Mailing Address				
5350 TICONDEROGA STREET MILTON FL 32570		5350 TICONDEROGA STREET MILTON FL 32570		94024851		
Principal Place of Business     3. Mailing Address						
2. Principal Prace of Business		3. Ivianing Address		I DERBARA BY BANKA BURK BANK BANK BANK BANK BANKA B		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E034 (11/03)		
City & State		City & State		4. FEL Number 40814Z	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Currer	nt Registered Agent	<u> </u>	7. Name and Address of New Registered Agent		
			Name			
SWEENEY, BARBARA JANE 5350 TICONDEROGA STREET MILTON FL 32570			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
MIL	TON FL 32570		City		Zip Code	
A 771					FL   '	
	e named entity submits this statement tions of registered agent.	for the purpose of changing it	s registered office or regi	istered agent, or both, in the State of Florida.	i am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered age	not and title if applicable (NO	TE: Registered Agent signature rec	cuired when reinstation)	ATE	
The second second second	energia sultari i mini kapistan kapan k			T	··· <del>-</del>	
Afte	ILE NOW!!! FEE IS \$150.00 or May 1, 2004 Fee will be \$550.00 k Payable to Florida Department	5 1 5 1 5 1 5 1 7 7 7 8 7 7 8 8 9 5 7 5 4 5 5 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	☐ Delete	TITLE		Change Addition	
NAME	SWEENEY, EZRA JUNIOR		NAME	·		
STREET ADDRESS	5350 TICONDEROGA STREET		STREET ADDRESS			
CITY-ST-ZIP	MILTON FL 32570		CITY-ST-ZIP			
TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	SMITH, KRISTOPHER D		NAME			
STREET ADDRESS	5350 TICONDEROGA STREET		STREET ADDRESS			
CITY-ST-ZIP	MILTON FL 32570	,	CITY-ST-ZIP			

TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

TITLE NAME -

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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:

TITLE

NAME

TITLE

NAME

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SWEENEY, BARBARA JANE ...

5350 TICONDEROGA STREET

SWEENEY, CECIL ELBERT

5350 TICONDEROGA STREET

MILTON FL 32570

MILTON FL 32570

Delete

☐ Delete

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02-26-2004 850 626 0661

**FILED** 

**Secretary of State** 

03-04-2004 90019 048 \*\*\*150.00

Mar 04, 2004 8:00 am

Change

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