

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2006 8:00 am
Secretary of State

07-10-2006 90029 019 ***163.75

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1. Entity Name

REYNOLDS & SONS PAINTING, INC.



Principal Place of Business

33242 FOREST RIDGE RD
DELAND, FL 32720

Mailing Address

33242 FOREST RIDGE RD
DELAND, FL 32720



DO NOT WRITE IN THIS SPACE

07022006 No Chg-P CR2E034 (11/05)

4. FEI Number

51-0485920

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REYNOLDS, GARY
33242 FOREST RIDGE RD
DELAND, FL 32720

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IN THIS SPACE**

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 reappointing)

7-2-06

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

TITLE P
NAME REYNOLDS, GARY
STREET ADDRESS 33242 FOREST RIDGE RD
CITY ST ZIP DELAND, FL 32720

TITLE ST
NAME CHENOWETH CULP, ELEN
STREET ADDRESS 33242 FOREST RIDGE RD
CITY ST ZIP DELAND, FL 32720

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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CITY ST ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

7-02-06

Daytime Phone #