2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State

DOCUMENT # P0300 1. Entity Name MATT THORNTON ACRYLIC		
Principal Place of Business	Mailing Address	
1401 WOOD LAKE CIR ST CLOUD, FL 34772	1401 WOOD LAKE CIR St Cloud, Fl. 34772	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent



01052005

No Chg-P

CR2E034 (10/03)

4. FEI Number 16-1681036

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

THORNTON, MATTHEW

changed, or on an attac

1401 WOOD LAKE CIR ST CLOUD, FL 34772		IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the priors of registered agent.	surpose of changing its registered offi	ice or reg	istered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	# applicable. (NOTE, Registered Agent	r t signature rec	quired when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000184726 01/20/05-80041-007 158.75
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P THORNTON, MATTHEW 1401 WOOD LAKE CIR ST CLOUD, FL 34772	ions .			··············
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		727 95.13	÷	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby a indicated of the cor	certify that the information supplied with this fill on this report or supplemental report is true a	ling does not qualify for the exemption and accurate and that my signature shall be executed by	n stated in	n Section 119.07(3)(the same legal effect	i), Florida Statutes. I further certify that the information at as if made under oath; that I am an engine or director