


FILED
Apr 27, 2004 8:00 am
Secretary of State

WYUOUSJL

DOCUMENT # P03000120099				Secretary of State 04-27-2004 90056 034 ***158.75	
1. Entity Name ROBERT MYERS PAINTING, INC.					
Principal Place of Business 31123 HIBISCUS DRIVE BIG PINE KEY, FL 33043		Mailing Address 31123 HIBISCUS DRIVE BIG PINE KEY, FL 33043			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04202004 Chg-P CR2E034 (10/03)	
City & State		City & State		4. FEI Number 42-1607150	
Zip		Country		Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COLEMAN, JERRY ESQ 201 FRONT STREET STE 203 KEW WEST, FL 33040				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: JERRY COLEMAN, ESQ (NOTE: Registered Agent signature required when reinstating) DATE: 4-23-04					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DP MYERS, ROBERT J 31123 HIBISCUS DRIVE BIG PINE KEY, FL 33043 <input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
DV MYERS, ROBERT J 31123 HIBISCUS DRIVE BIG PINE KEY, FL 33043 <input checked="" type="checkbox"/> Delete			DV MYERS, HELENA 31123 HIBISCUS DR. BIG PINE KEY, FL 33043 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> 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: Helena Myers DATE: 4-23-04 305 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 874-4456					