

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124183

FILED  
Mar 15, 2007  
Secretary of State

**Entity Name:** VISUAL EFFECTS PROFESSIONAL PAINTING SERVICE, INCORPORATED

**Current Principal Place of Business:**

2807 SAXON DRIVE  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

145 OAK RIDGE AVE.  
EDGEWATER, FL 32132

**Current Mailing Address:**

2807 SAXON DRIVE  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

145 OAK RIDGE AVE.  
EDGEWATER, FL 32132

**FEI Number:** 86-1084444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KELLY, PATRICK G  
2807 SAXON DRIVE  
NEW SMYRNA BEACH, FL 32169 US

**Name and Address of New Registered Agent:**

KELLY, PATRICK G  
145 OAK RIDGE AVE.  
EDGEWATER, FL 32132 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: PATRICK G. KELLY

03/15/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KELLY, PATRICK G  
Address: 2807 SAXON DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S ( ) Delete  
Name: KELLY, LINDA M  
Address: 2807 SAXON DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KELLY, PATRICK G  
Address: 145 OAK RIDGE AVE.  
City-St-Zip: EDGEWATER, FL 32132

Title: S (X) Change ( ) Addition  
Name: KELLY, LINDA M  
Address: 145 OAK RIDGE AVE.  
City-St-Zip: EDGEWATER, FL 32132

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 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.

SIGNATURE: PATRICK G. KELLY

P

03/15/2007

Electronic Signature of Signing Officer or Director

Date