


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000124635</b>		
1. Entity Name JOHN WOODRUFF PAINTING, INC.		
Principal Place of Business 2924 13 STREET NORTH ST PETERSBURG, FL 33704	Mailing Address 2924 13 STREET NORTH ST PETERSBURG, FL 33704	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  GOODMAN, GARTH R 575 SECOND AVE SOUTH STE 206 ST PETERSBURG, FL 33701		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOODRUFF, JOHN 2924 13TH ST. N. SAINT PETERSBURG, FL 33704	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAMILTON, ALLAN C 1650 47TH ST. N SAINT PETERSBURG, FL 33713	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>John Woodruff</u> <u>John Woodruff</u> 4-12-06 727-823-9975 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



04072006 No Chg-P CR2E034 (11/05)

4. FEI Number 13-4269338	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

U00000510227  
04/28/06-80074-019 150.00

**DO NOT WRITE  
IN THIS SPACE**