

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2008 8:00 am**  
**Secretary of State**

03-06-2008 90036 036 \*\*\*150.00

**DOCUMENT # P03000124635**

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

**DO NOT WRITE IN THIS SPACE**



02082008 No Chg-P CR2E034 (11/05)

4. FEI Number

13-4269338

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

GOODMAN, GARTH R  
575 SECOND AVE SOUTH STE 206  
ST PETERSBURG, FL 33701

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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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME WOODRUFF, JOHN  
STREET ADDRESS 2924 13TH ST. N.  
CITY-ST-ZIP SAINT PETERSBURG, FL 33704

TITLE V  
NAME HAMILTON, ALLAN C  
STREET ADDRESS 1650 47TH ST. N  
CITY-ST-ZIP SAINT PETERSBURG, FL 33713

TITLE S  
NAME GOODSON, JULIE  
STREET ADDRESS 2924 13 STREET NORTH  
CITY-ST-ZIP ST PETERSBURG, FL 33704

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
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

Daytime Phone #