

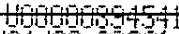
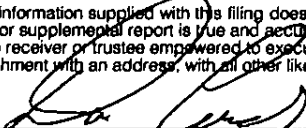


FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P03000125984				Apr 14, 2008 08:00 Secretary of State	
1. Entity Name DON COWSERT PAINTING, INC.					
Principal Place of Business 1550 16TH STREET ORANGE CITY, FL 32763		Mailing Address 1550 16TH STREET ORANGE CITY, FL 32763			
DO NOT WRITE IN THIS SPACE					
		01152008 No Chg-P CR2E034 (11/05)			
		4. FEI Number 14-1899376		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COWSERT, DONALD L 1550 16TH STREET ORANGE CITY, FL 32763		DO NOT WRITE 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 _____ (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. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		 04/24/08-80031-022 150.00			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO NOT WRITE IN THIS SPACE			
D COWSERT, DONALD L 1550 16TH STREET ORANGE CITY, FL 32763					
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: 		Apr 13, 08 386774156			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			