



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000128307</b> 1. Entity Name CNC PAINTING INC.	
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Principal Place of Business 1769 RANGOON RD. NW PALM BAY, FL	Mailing Address 1769 RANGOON RD. NW PALM BAY, FL
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**DO NOT WRITE IN THIS SPACE**

	
01312008 No Chg-P	CR2E034 (11/05)
4. FEI Number <b>73-1688348</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  MCCARTHY, CLAYTON J 1769 RANGOON RD. NW PALM BAY, FL	<b>DO NOT WRITE IN THIS SPACE</b>
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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 renewing) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 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	U00000920280 05/14/08-80038-003 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT MCCARTHY, CLAYTON J SR. 1769 RANGOON RD. NW PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS MCCARTHY, NICOLE J 1769 RANGOON RD NW PALM BAY, FL 32907
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**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:** *Clayton J. McCarthy* *Nicole J. McCarthy* *4/24/08* *321 952 8221*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #