

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132261

FILED
Apr 26, 2005
Secretary of State

Entity Name: JAMES HOWELL'S PAINTING, INC.

Current Principal Place of Business:

17104 72ND ROAD NORTH
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

16109 87TH LN N
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

17104 72ND ROAD NORTH
LOXAHATCHEE, FL 33470 US

New Mailing Address:

16109 87TH LN N
LOXAHATCHEE, FL 33470 US

FEI Number: 37-1478757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, JAMES
17104 72ND ROAD NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

HOWELL, JAMES
16109 87TH LN N
LOXAHATCHEE, FL 33470 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HOWELL, JAMES
Address: 17104 72ND ROAD NORTH
City-St-Zip: LOXAHATCHEE, FL 33470 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HOWELL, JAMES
Address: 16109 87TH LN N
City-St-Zip: LOXAHATCHEE, FL 33470 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES LEE HOWELL JR

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date