


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000135701</b>		
1. Entity Name ARTHUR MCKINNEY PAINTING, INC.		
Principal Place of Business 6758 RAVINE ST MILTON, FL 32570	Mailing Address 6758 RAVINE ST MILTON, FL 32570	
<b>DO NOT WRITE IN THIS SPACE</b>		
5. Name and Address of Current Registered Agent  MCKINNEY, ARTHUR 6758 RAVINE ST MILTON, FL 32570		<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: <i>Arthur C. McKinney</i> (NOTE: Registered Agent signature required when reinstating) DATE: <u>4-15-05</u>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 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
<b>10. OFFICERS AND DIRECTORS</b>		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCKINNEY, ARTHUR 6758 RAVINE ST MILTON, FL 32570	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KINKADE, JEFFREY H 6758 RAVINE ST MILTON, FL 32570	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Arthur C. McKinney</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>4-15-05</u> (850) <u>623-5761</u>



04152005 No Chg-P CR2E034 (10/03)

4. FEI Number 11-3709965	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

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04/18/05-80096-013 150.00