

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137930

Entity Name: SILCOX PAINTING, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

6650 SE 85TH AVE
NEWBERRY, FL 32669

New Principal Place of Business:

6580 SE 82ND AVE
NEWBERRY, FL 32669

Current Mailing Address:

P O BOX 1771
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 20-0724584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILCOX, AARON R
6650 SE 85 AVE
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

SILCOX, AARON R
6580 SE 82ND AVE
NEWBERRY, FL 32669 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: AARON R SILCOX

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILCOX, AARON
Address: P O BOX 1771
City-St-Zip: NEWBERRY, FL 32669

Title: VP () Delete
Name: TONYA, SILCOX
Address: P.O.BOX 1771
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SILCOX, AARON
Address: 6580 SE 82ND AVE
City-St-Zip: NEWBERRY, FL 32669

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: AARON R SILCOX

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date