2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000138460

1. Entity Name

CARLSON CUSTOM PAINTING INC



FILED Jan 08, 2007 08:00 AM Secretary of State

Principal Place of Business

5233 MYRTLE LANE NAPLES, FL 34113 L Mailing Address

5233 MYRTLE LANE NAPLES, FL 34113

US



DO NOT WRITE IN THIS SPACE

01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0533634 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARLSON, KENNETH E JR 5233 MYRTLE LANE NAPLES, FL 34113

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					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	'\$ 🗀	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET AODRESS CITY-ST-ZIP	P CARLSON, KENNETH E JR. 5233 MYRTLE LANE NAPLES, FL 34113				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000577525 01/08/07-80020-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADORESS CITY-ST-ZIP				IN ¹	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

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

CITY-ST-7P

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4 /03

239-404-7022
