2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2006
Secretary of State

DOCUMENT# P03000139025

Entity Name: SHOVEY PAINTING, INC.

Current Principal Place of Business:

4663 SW 108TH PLACE
OCALA, FL 34476

New Principal Place of Business:

10445 SW 52ND CT
OCALA, FL 34476

Current Mailing Address:

4663 SW 108TH PLACE
OCALA, FL 34476

New Mailing Address:

10445 SW 52ND CT
OCALA, FL 34476

FEI Number: 03-0532811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHOVEY, JIM
4663 SW 108TH PLACE
OCALA, FL 34476 US

Name and Address of New Registered Agent:

SHOVEY, JIM
10445 SW 52ND CT
OCALA, FL 34476 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: JIM SHOVEY 08/26/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: SHOVEY, JIM
Address: 4663 SW 108TH PLACE
City-St-Zip: OCALA, FL 34476

Title: VP ( ) Delete
Name: SHOVEY, ANNA M
Address: 4663 SW 108TH PLACE
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: SHOVEY, JIM
Address: 10445 SW 52ND CT
City-St-Zip: OCALA, FL 34476

Title: VP (X) Change ( ) Addition
Name: SHOVEY, ANNA M
Address: 10445 SW 52ND CT
City-St-Zip: OCALA, FL 34476

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNA M SHOVEY VP 08/26/2006
Electronic Signature of Signing Officer or Director Date