

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140594

FILED  
Aug 28, 2009  
Secretary of State

Entity Name: BRIAN BAKER PAINTING, INC.

## Current Principal Place of Business:

8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33904

## New Principal Place of Business:

8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33903

## Current Mailing Address:

8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33904

## New Mailing Address:

8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33903

FEI Number: 87-0714615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAKER, BRIAN A  
8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33904 US

## Name and Address of New Registered Agent:

BAKER, BRIAN A  
8410 AQUA COVE LANE  
NORTH FORT MYERS, FL 33903 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:

08/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BAKER, BRIAN A  
Address: 8410 AQUA COVE LANE  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRIAN A BAKER

D

08/28/2009

Electronic Signature of Signing Officer or Director

Date