

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000141599

1. Entity Name
ARTISTIC TIMBER, INC.



Principal Place of Business
**14320 FRESNO DRIVE
ORLANDO, FL 32832**

Mailing Address
**14320 FRESNO DRIVE
ORLANDO, FL 32832**



04052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
47-0935224

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BATTISTELLA, DINO M
14320 FRESNO DRIVE
ORLANDO, FL 32832**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BATTISTELLA, DINO M
STREET ADDRESS	14320 FRESNO DRIVE
CITY-ST-ZIP	ORLANDO, FL 32832
TITLE	VP
NAME	BATTISTELLA, ANNA MARIA A
STREET ADDRESS	14320 FRESNO DRIVE
CITY-ST-ZIP	ORLANDO, FL 32832
TITLE	VP
NAME	BATTISTELLA, ANTONIO G
STREET ADDRESS	14320 FRESNO DRIVE
CITY-ST-ZIP	ORLANDO, FL 32832
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/06-80056-018 150.00

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IN THIS SPACE**

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: *DINO BATTISTELLA* **DINO BATTISTELLA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-06

Date

407(277-0097)

Daytime Phone #