

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141655

FILED  
Jun 24, 2005  
Secretary of State

Entity Name: S & R PAINTING AND SERVICES OF THE TREASURE COAST, INC.

**Current Principal Place of Business:**

50 SW BLAKBURN TERRACE #4  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

50 SW BLAKBURN TERRACE #4  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 20-1059066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOWLER, STATEN  
50 SW BLAKBURN TERRACE #4  
STUART, FL 34997 US

**Name and Address of New Registered Agent:**

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:

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: PVT ( ) Delete  
Name: FOWLER, STATEN JR  
Address: 50 SW BLAKBURN TERRACE #4  
City-St-Zip: STUART, FL 34997

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVT (X) Change ( ) Addition  
Name: FOWLER, STATEN JR  
Address: 50 SW BLAKBURN TERRACE #4  
City-St-Zip: STUART, FL 34997

Title: S ( ) Change (X) Addition  
Name: HANDY, ALVIE  
Address: 11411 SE FEDERAL HWY  
City-St-Zip: HOBE SOUND, FL 33455 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STATEN FOWLER, JR.

PVT

06/24/2005

Electronic Signature of Signing Officer or Director

Date