## 2007 FOR PROFIT CORPORATION

## Apr 26, 2007 8:00 am Secretary of State ANNUAL REPORT 04-26-2007 90214 014 \*\*\*158.75 DOCUMENT # P03000142411 VANDALE PAINTING, INC. Principal Place of Business Mailing Address 10202 NORTH EDISON 10202 NORTH EDISON TAMPA, FL 33612 TAMPA, FL 33612 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03302007 CR2E034 (12/06) City & State City & State 4. FELNumber Applied For 61-1461067 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VANDERLAAN, DAVID E Street Address (P.O. Box Number is Not Acceptable) 10202 NORTH EDISON TAMPA, FL 33612 City Zip Code 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typod or printed name of sugistered agent and title if applicable (NOTE: Registered Agent signaturo required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PΠ TITLE ☐ Delete TITLE ☐ Change ☐ Addition VANDERLAAN, DAVID E NAME NAME STREET ADDRESS 10202 NORTH EDISON STREET ADDRESS CITY ST ZIP TAMPA, FL 33612 CITY ST ZIP **FXVP** Delete TITLE TITLE ☐ Change Addition VANDERLAAN, DONNA Y NAME 10202 NORTH EDISON STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33612 CITY - ST - ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition VANDERLAAN, DONNA Y NAME NAME STREET ADDRESS 10202 NORTH EDISON STREET ADDRESS CITY-ST ZIP TAMPA, FL 33612 CITY ST ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME VANDERLAAN, ERIC T NAME 10202 NORTH EDISON STREET ADDRESS STREET ADDRESS TAMPA, FL 33612 CITY ST-ZIP CITY ST-ZIP TITLE ☐ Delete TITLE Change Addition TWISDALE, MICHAEL D JR. NAME NAME STREET ADDRESS 10202 NORTH EDISON STREET ADDRESS CITY ST 7IP TAMPA, FL 33612 CITY ST ZIP TITLE ☐ Delete TITLE Chance Addition

12. Hereby certify that the information supplied with this filling 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

NAME

STREET ADDRESS

CITY ST ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY ST ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIG