2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 17, 2006 8:00 am Secretary of State DOCUMENT # P03000145421 04-17-2006 90416 023 ***150.00 1. Entity Name FIELDS PAINTING, INC. Principal Place of Business Mailing Address 116 MARIS COURT 116 MARIS COURT LAKELAND, FL 33809 LAKELAND, FL 33809 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P CR2E034 (11/05) 03132006 Applied For 4. FEI Number City & State City & State 56-2423577 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FIELDS, BEN Street Address (P.O. Box Number is Not Acceptable) 116 MARIS COURT LAKELAND, FL 33809 City Zip Code FL 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D TITLE ☐ Defete TITLE FIELDS, BEN NAME NAME STREET ADDRESS 116 MARIS COURT STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZIP ☐ Addition TITLE CP ☐ Delete TITLE Change FIELDS, BEN NAME NAME STREET ADDRESS 116 MARIS COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP LAKELAND, FL 33809 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME FIELDS, JAMES NAME 116 MARIS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND, FL 33809 ☐ Change ☐ Addition ☐ Delete TITLE TITLE POST, REBECCA NAME 116 MARIS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MUNDIS, REGINA NAME NAME 116 MARIS COURT STREET ADDRESS STREET ADDRESS LAKELAND, FL 33809 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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

4-12-06 (863) 859-1129

FILED