2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000147071

1. Entity Name
MOORE'S PAINTING AND WATERPROOFING, INC.

Principal Place of Business	Mailing Address
430 NW 2 AVE	430 NW 2 AVE
HIGH SPRINGS, FL 32643	HIGH SPRINGS, FL 32643

DO NOT WRITE IN THIS SPACE

04062006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-0497860	Not Applicable

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

6. Name and Address of Current Registered Agent

MOORE, DWAYNE
430 NW 2 AVE
HIGH SPRINGS, FL 32643

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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 reinstating)

DATE 4-9-06

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

U00000503087
04/26/06-80017-020 158.75

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MOORE, DWAYNE
STREET ADDRESS	430 NW 2 AVE
CITY-ST-ZIP	HIGH SPRINGS, FL 32643

TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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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 B, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dewayne Moore 4-9-06
Date   Daytime Phone #

PLEASE SIC
& DAT