2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150829

FILED Jan 21, 2008 Secretary of State

Entity Nam	ie: STEVE'S F	PAINTING SERVICE, INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
411 OLD DI LADY LAKE					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX 1 LADY LAKE					
FEI Number: 2	20-0478733	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MARTIN, CHRESCENDA S 114 OLD DIXIE HWY SUJITE 114 LADY LAKE, FL 32159 US			114 OLD DIXIE HW SUTE 114	MARTIN, CHRESCENDA S 114 OLD DIXIE HWY SUTE 114 LADY LAKE, FL 32159 US	
The above r		ubmits this statement for the pu	rpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: CHRESCENDA MARTIN				01/21/2008	
		s Signature of Registered Ager	nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I MARTIN, STEVE 554 GREGORY I UMATILLA, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[MARTIN, CHRES 554 GREGORY I UMATILLA, FL 3	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CHRESCENDA MARTIN CEO 01/21/2008