## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** May 01, 2008 8:00 am Secretary of State

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<b>DOCUMENT</b>	# P030	001:	53196	

1. Entity Nam KEVIN S		D PAINTING, INC	<b>.</b>			4				
Principal Plac	e of Busines	s	Mailing Address							
6122 FOREST PINES ST PENSACOLA, FL 32526 6122 FOREST PINES ST PENSACOLA, FL 32526 PENSACOLA, FL 32526										
2. Principal P	Place of Busin	ness - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.				04252008	Chg-P	CR2E03	4 (12/06)			
City & State		City & State	·		4. FEI Number 54-213			<del></del>	pplied For ot Applicable	
Zip		Country	Zip	Coun	itry	5. Certificate	of Status Desired		8.75 Add ee Require	
	6. Name	and Address of Currer	nt Registered Agent			7. Name and	Address of New	Registered Aç	gent	
STANFIELD, KEVIN 6122 FOREST PINES ST. PENSACOLA, FL 32526		Name Street Address (P.O. Box Number is Not Acceptable)								
	,									
					City			FL	Zip Code	е
8. The above	named entit	y submits this statement tered agent.	for the purpose of changing it	s register	ed office or registe	red agent, or bo	th, in the State of F	lorida. I am fa	miliar with,	and accept
	J	J								
SIGNATURE	Signature, typed	t or printed name of registered age	ent and sitle if applicable. (NO	TE: Registere	d Agent signature require	d when reinstating)		DATE		
				•			,			
After Ma	ay 1, 200	FEE IS \$150.00 8 Fee will be \$550	9. Election Campa Trust Fund Con			.00 May Be ded to Fees				
After Ma		8 Fee will be \$550	i – – . –		☐ Ådo	ted to Fees	CHANGES TO OF	FICERS AND D	DIRECTOR	S IN 11
10.	<b>PVST</b>	8 Fee will be \$550 OFFICERS AN	1.00 Trust Fund Con	11.	Add	ted to Fees	CHANGES TO OF		DIRECTÖRS □ Change	S IN 11
After M	PVST STANFIE	8 Fee will be \$550	D DIRECTORS	11.	Add	ted to Fees	CHANGES TO OF			
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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.

SIGNATURE: / / /