2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2007 08:00 AM Secretary of State **DOCUMENT # P03000155165** NATHAN DEWEY PAINTING CO. Principal Place of Business Mailing Address 804 PINELAND AVE. **804 PINELAND AVE.** VENICE, FL 34292 VENICE, FL 34292 01282007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2431677 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEWEY, NATHAN DO NOT WRITE 804 PINELAND AVE. VENICE, FL 34292 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME DEWEY, NATHAN STREET ADDRESS 804 PINELAND AVE. City-St-7iP VENICE, FL 34292 000000714568 04/27/07-80028-015 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE City-St-Zie TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

RIGHATURE AND TYPED ON FRONTED NAME OF SIGNING OFFICER OR DIRECTOR

16/07 941-484-45

FILED