2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000156932

Principal Place of Business

HODGES, JAMES C

TALLAHASSEE, FL 32310 US

1373 JAY BIRD LANE

J.C. HODGES PAINTING, INC.



Mailing Address

1373 JAY BIRD LANE

TALLAHASSEE, FL 32310 US

APPhu. FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03192006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0534037

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

DO NOT WRITE

1373 JAY BIRD LANE TALLAHASSEE, FL 32310			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
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		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P HODGES, JAMES 1373 JAY BIRD LANE TALLAHASSEE, FL 32310 V HODGES, SEPTEMBER 525 ROCK DRIVE			9 05/0	00073985649 4/0601016022 **150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS	TALLAHASSEE, FL 32310 V KENDELL, DAVID SCOTT 496 WOODVILLE HWY				NOT WRITE
CITY-ST-ZIP	CRAWFORDVILLE, FL 32327				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADORESS CITY-ST-2IP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				and in Change	10. Slavida Statuta Listana patifu that the information
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 suppremental report is true and accurate and that my signature shall have the same legal effect as it 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: