2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000000529

1. Entity Name
TAKE PRIDE PAINTING, INC.

Principal Place of Business	Mailing Address
2407 SAXON DR	2407 SAXON DR
NEW SMYRNA BCH, FL 32169	NEW SMYRNA BCH, FL 32169

40030224

DO NOT WRITE IN THIS SPACE

01112007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0503717	Not Applicable

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

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6. Name and Address of Current Registered Agent

GUSSENBAUER, LARRY
2407 SAXON DR
NEW SMYRNA BCH, FL 32169

DO NOT WRITE IN THIS SPACE

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

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10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	GUSSENBAUER, LARRY
STREET ADDRESS	2407 SAXON DR
CITY-ST-ZIP	NEW SMYRNA BCH, FL 32169

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Larry Gussenbauer_   1-17-07   1-336-427-2773

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #