2006 FOR PROFIT CORPORATION **FILED** ANNUAL REPORT (AR) Jan 23, 2006 08:00 AM Secretary of State CUMENT # P04000002051 PAINTING, INC. Place of Business Mailing Address BLACKROCK ROAD 96156 BLACKROCK ROAD EFL 32097 YULLEE FL 32097 2 cipal Place of Business 3. Mailing Address e. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State & State 4. FEI Number 52-2437725 Not Applicat Country Zιp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ELORD, WILLIAM E JR Street Address (P.O. Box Number is Not Acceptable) 442 BLACKROCK ROAD YULLEE FL 32097 City Zip Code 8 above named entity submits this statement for the aurpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access colligations of registered agent S INOTE Registered Agent signature required when remetaling) Signature, typed or printed name of registered agent and title if applicable 3 FLE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May C After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Theck Payable to Florida Department of State À. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 11. ☐ Change ☐ Admi m DPS Detete TITLE U00000396254 MAME LORD, WILLIAM E JR NΛ 01/30/06-80002-006 150.00 STREET ADDRESS Si 96156 BLACKROCK RD. CII YULLEE FL 32097 CITY-ST-ZIP ☐ Change □ Adding Τ{ξ Delete THILE ΝA NAME STREET ADDRESS ST CITY - ST- ZIP cn UK. 3171.5 Change 777 ☐ Delate NAME NA STREET ADDRESS ST CII CITY-ST-ZIP ☐ Change □ Alli" BL Delete HIZE NAI MAME STREET ADDRESS STF CΙΤ CHY-ST-ZIP TITE Oclete Change Arani NAME NAI STREET ADDRESS STE CITY-ST-ZIP CIT Defete Change Adding 7172 TISLE NA NAME STR STREET ADDRESS

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certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information licated 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 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 transport, or on an attachment with an address, without other like empowered.

William Lori

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