



2008 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-01-2008 90244 043 ***150.00

DOCUMENT # P04000012280 1. Entity Name LASTING IMPRESSIONS BY WADE GAINES, INC.			
Principal Place of Business 3000 E CERVANTES UNIT C PENSACOLA, FL 32503		Mailing Address 3000 E CERVANTES UNIT C PENSACOLA, FL 32503	
2. Principal Place of Business - No P.O. Box # 1225 Scott Street		3. Mailing Address 1225 Scott Street	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Pensacola, FL		City & State Pensacola, FL	
Zip 32503		Zip 32503	
Country US		Country US	
4. FEI Number 20-0803833		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GAINES, STEPHEN W 3000 E CERVANTES UNIT C PENSACOLA, FL 32503		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1225 Scott Street City Pensacola FL Zip Code 32503	
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: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<div style="display: flex; justify-content: space-between;"> <div> FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 </div> <div> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees </div> </div>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PRES	NAME GAINES, JONIKKA J PRES	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3000 E CERVANTES UNIT C	CITY-ST-ZIP PENSACOLA, FL 32503	1225 Scott Street Pensacola, FL 32503	
TITLE VPS	NAME GAINES, STEPHEN W VP/SEC	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3000 E CERVANTES UNIT C	CITY-ST-ZIP PENSACOLA, FL 32503	1225 Scott Street Pensacola, FL 32503	
TITLE 	NAME 	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 		
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: 		Date Stephen Gaines	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Devtime Phone # (850) 434-3686	