2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051136

Entity Name: COLORATIONS PAINTING OF BAY COUNTY, INC.

FILED Jun 28, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	LES ROAD DRT, FL 32409	US					
Current N	lailing Address	3 :	New Maili	New Mailing Address:			
	LES ROAD DRT, FL 32409	US					
FEI Number	: 20-0906323	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	l Address of Cu	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	LD, LISA LES ROAD DRT, FL 32409	US					
	e named entity so e of Florida.	ubmits this statement for the	purpose of changing i	ts registered	office or registered agent, or b	oth,	
SIGNATUI	RE:						
	Electronic	c Signature of Registered Ag	jent		Date		
Election Ca	mpaign Financing	Trust Fund Contribution ().					
OFFICER	S AND DIRECT	ORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIREC	TORS:	
Title: Name: Address: City-St-Zip:	VP () [SPANN, JOSEPH 4037 VOYLES R SOUTHPORT, FL	OAD	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () [SCHOFIELD, LIS 4037 VOYLES R SOUTHPORT, FL	OAD	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	FORAN, JON 4037 VOYLE			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH SPANN VP 06/28/2005