

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060655

Entity Name: DOC'S PAINTING, INC.

FILED
Sep 10, 2009
Secretary of State

Current Principal Place of Business:

15680 GLENDALE LANE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

15680 GLENDALE LANE
FORT MYERS, FL 33912

New Mailing Address:

14811 HOLE-IN-ONE CIRCLE
PH#1
FORT MYERS, FL 33919

FEI Number: 20-0982766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, ROBERT D
15680 GLENDALE LANE
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

WOODS, ROBERT D
14811 HOLE-IN-ONE CIRCLE
PH31
FORT MYERS, FL 33919 US

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.

SIGNATURE:

09/10/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P ST () Delete
Name: WOODS, ROBERT D
Address: 15680 GLENDALE LANE
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: WOODS, ROBERT D
Address: 15680 GLENDALE LANE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ST (X) Change () Addition
Name: WOODS, ROBERT D
Address: 14811 HOLE-IN-ONE CIRCLE PH#1
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Change () Addition
Name: WOODS, ROBERT D
Address: 14811 HOLE-IN-ONE CIRCLE PH#1
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT DALE WOODS

PRES

09/10/2009

Electronic Signature of Signing Officer or Director

Date