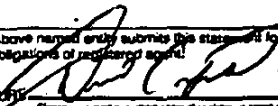
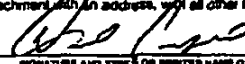


FILED
Aug 10, 2005 8:00 am
Secretary of State

08-10-2005 90017 006 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000070753			
1. Entity Name DAVE'S PAINTING & MORE, INC.			
Principal Place of Business 509 AVENUE K NORTH EAST WINTER HAVEN, FL 33881		Mailing Address 509 AVENUE K NORTH EAST WINTER HAVEN, FL 33881	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-1104052		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CANFIELD, DAVE 509 AVENUE K NORTH EAST WINTER HAVEN, FL 33881		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
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: 		DATE: 7/5/05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	TITLE	☐ Change ☐ Addition
NAME	CANFIELD, DAVE	NAME	
STREET ADDRESS	509 AVENUE K NORTH EAST	STREET ADDRESS	
CITY- ST- ZIP	WINTER HAVEN, FL 33881	CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
12. I hereby certify that the information supplied with this filing does not qualify 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 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, not as other like empowered.			
SIGNATURE: 		Date: 7-11-05 221-3208	
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

50060886



0204 2005 Chg-P CR2E034 (10/03)

ATTACHMENT

52060886
#P04000070753
8/6/05

To Whom it may concern:

I recently recieved your letter back for the reason of not filed due to not sending file fee of \$150.⁰⁰. The forms I filed with the help of my CPA was sent at around March 05 due to me not understanding procedures I signed at bottom not in middle of page and I didn't send a check at the time I had sent out a 941 form with other government forms and over looked the file fee I'm asking your office to overlook this oversight. If you look at the original application I sent the forms at approximately 3-15-05 and resubmit the form again at 5/5/05 I ask that you could have mercy upon me for not fully understanding these procedures

Thank You

[Signature]