


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000085247		
1. Entity Name FRANK BOLES PAINTING INC.		

Principal Place of Business 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434	Mailing Address 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

09022005 Chg-P CR2E034 (10/03)

4. FEI Number <b>25-1906873</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BOLES, FRANKLIN D JR. 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434		Name Street Address (P.O. Box Number is Not Acceptable) 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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D BOLES, FRANKLIN D JR. 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/T BOLES, FRANKLIN D JR. 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOLES, FRANKLIN D JR. 10139 N. CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, with all other like empowered.

SIGNATURE: <u>Frank Boles</u> Frank Boles	9-11-05 352-220-1484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

FILED

05 SEP 16 PM 12:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**50066906**



ATTACHMENT

500616906  
#P04000085247 9-11-05

To Division of Corporations

I am Frank Bolis the owner of Frank Bolis Painting Inc. I do not believe I recieved an annual report notice.

My Brother and co-worker was one of the National Guardsmen that died in Iraq. I have not been very buisness minded since then. I am sorry for the inconvenience.

Frank Bolis  
Frank Bolis Painting Inc.