## **2008 FOR PROFIT CORPORATION**

## FILED **ANNUAL REPORT** Apr 16, 2008 08:00 A Secretary of State DOCUMENT # P04000122674 PAINTING PROCESS INCORPORATED Principal Place of Business Mailing Address **5803 SOUTHWIND DRIVE 5803 SOUTHWIND DRIVE** MULBERRY, FL 33860 MULBERRY, FL 33860 CR2E034 (11/05) 01142008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1546378 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent **BROWN, DOUGLAS A** DO NOT WRITE 5803 SOUTHWIND DRIVE MULBERRY, FL 33860 IN THIS SPACE 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 signeture required when reinstating) 9. Election Campaign Financing \$5.00 May Be File NOW!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees U00000900059 After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **PRFS** TITLE BROWN, DOUGLAS A NAME STREET ADDRESS 5803 SOUTHWIND DRIVE CITY-ST-ZIP MULBERRY, FL 33860 TITLE BROWN, KATHY A NAME STREET ADDRESS 5803 SOUTHWIND DR CITY-ST-7/P MULBERRY, FL 33860 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

Devtime Phone #