2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Mar 01, 2006 08:00 AM DOCUMENT # P04000142733 **Secretary of State** 1. Entity Name BARTLETT HOUSE PAINTING, INC. Principal Place of Business Mailing Address 2623 S COLEMAN AVE 2623 S COLEMAN AVE HOMOSASSA, FL 33778 HOMOSASSA, FL 33778 CR2E034 (11/05) 02182006 No Cho-P DO NOT WRITE IN THIS SPACE 4. FEI Number 34-2021080 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOETTGER, GEORGE A DO NOT WRITE 2623 S COLEMAN AVE HOMOSASSA, FL 33778 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, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE BOETTGER, GEORGE A NAME STREET ADDRESS 2623 S COLEMAN AVE CITY-ST-DP HOMOSASSA, FL 33778 NAME 100000451542 STREET ADDRESS CITY-ST-ZIP

#3710706-80057-022 158.75

Applied For

DO NOT WRITE IN THIS SPACE

12. (hereby certify that the information supplied with this filling 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 eath; 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

NAME STREET ADDRESS

SILE NAME STREET ADDRESS CITY-ST-ZIP 71**7**1*E* NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

C17Y-S7-7IP