

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148339

FILED
Apr 30, 2008
Secretary of State

Entity Name: BRAD STENSTROM PAINTING INC.

Current Principal Place of Business:

303 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

817 BAYBREEZE LANE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

303 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

817 BAYBREEZE LANE
ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-1811350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STENSTROM, BRAD
303 HERMITS TRAIL
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

STENSTROM, BRAD
817 BAYBREEZE LANE
ALTAMONTE SPRINGS, FL 32701 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: BRAD STENSTROM

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: STENSTROM, BRAD
Address: 303 HERMITS TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: VP () Delete
Name: STENSTROM, ALLISON C
Address: 303 HERMITS TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STENSTROM, BRAD
Address: 817 BAYBREEZE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: VP (X) Change () Addition
Name: STENSTROM, ALLISON C
Address: 817 BAYBREEZE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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: BRAD STENSTROM

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04/30/2008

Electronic Signature of Signing Officer or Director

Date