2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

02-15-2006 90030 037 ****50.00
03-03-2006 90097 018 ***100.00

DOCUMENT # P05000114954

1. Entity Name
HIGHREACH PAINTING, INC.

Principal Place of Business	Mailing Address
3130 COY BURGESS LOOP DEFUNIAK SPRINGS, FL 32435 US	P.O. BOX 53 DEFUNIAK SPRINGS, FL 32435 US

2. Principal Place of Business	3. Mailing Address
3130 Coy Burgess Loop	P.O. Box 53
Suite, Apt. #, etc.	Suite, Apt. #, etc. DeFuniak Spgs. Fl.
City & State: DeFuniak Spgs. Fl.	City & State
Zip: 32435 Country: Walton	Zip: 32435 Country: Walton

02092006 Chg-P CR2E034 (11/05)

4. FEI Number 20-3327120 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MORGAN, DENNIS
3130 COY BURGESS LOOP
DEFUNIAK SPRINGS, FL 32435

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 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 NAME STREET ADDRESS CITY-ST-ZIP	P MORGAN, DENNIS 3130 COY BURGESS LOOP DEFUNIAK SPRINGS, FL 32435	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: Dennis Morgan 2-14-2006 (850) 596-1298
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #