

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 14, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000116948**

1. Entity Name  
**BRIGHTER WORLD PAINTING, INC**



Principal Place of Business  
**2905 92ND AVENUE EAST  
PARRISH, FL 34219**

Mailing Address  
**2905 92ND AVENUE EAST  
PARRISH, FL 34219**

**DO NOT WRITE IN THIS SPACE**



02012008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**20-3341576**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**BULLOCK, JAMIE M  
2905 92ND AVENUE EAST  
PARRISH, FL 34219**

**DO NOT WRITE  
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

*J. Bullock*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

*2-12-08*

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	VP
NAME	BULLOCK, ADAM J
STREET ADDRESS	2905 92ND AVENUE EAST
CITY- ST- ZIP	PARRISH, FL 34219
TITLE	P
NAME	BULLOCK, JAMIE M
STREET ADDRESS	2905 92ND AVENUE EAST
CITY- ST- ZIP	PARRISH, FL 34219
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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02/21/08-80089-005 158.75

**DO NOT WRITE  
IN THIS SPACE**

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:

*J. Bullock* JAMIE BULLOCK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*2-12-08*