

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000116948

Entity Name: BRIGHTER WORLD PAINTING, INC

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

2905 92ND AVENUE EAST
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

2905 92ND AVENUE EAST
PARRISH, FL 34219

New Mailing Address:

FEI Number: 20-3341576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BULLOCK, ADAM J
Address: 2905 92ND AVENUE EAST
City-St-Zip: PARRISH, FL 34219

Title: P () Delete
Name: BULLOCK, JAMIE M
Address: 2905 92ND AVENUE EAST
City-St-Zip: PARRISH, FL 34219

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: LEMMONS, MATHEW
Address: 6907 45TH TERRACE EAST
City-St-Zip: BRADENTON, FL 34203

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: JAMIE BULLOCK

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date