

APR-27-2006 09:11 From:

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FILED
Jun 20, 2006 8:00 am
Secretary of State

05-09-2006 90080 028 ***150.00

**2006.FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000137483			
1. Entity Name CLASSIC ISLAND COLORS, INC.			
Principal Place of Business AVENUE A & 1ST STREET BIG PINE KEY, FL 33043		Mailing Address PO BOX 430906 BIG PINE KEY, FL 33043	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Filing Number 20-3598712		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SIWEK, EDMUND 3727 Hibiscus Street Big Pine Key, FL 33043		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. This 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, hand or printed name of registered agent and one of applicable officers or directors. (If 12, Registered Agent signature is required when requested.) Date _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 Add to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGED TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIWEK, EDMUND 3727 Hibiscus Street Big Pine Key, FL 33043 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIWEK, LINDA 3727 Hibiscus Street Big Pine Key, FL 33043 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARNELL, KEITH 201 Camino Real Marathon, FL 33050 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARNELL, LINDA 201 Camino Real Marathon, FL 33050 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 individual or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or in an attachment with an address, with all other like empowerments.			
SIGNATURE: <i>Linda Siwek</i>		4-28-06 305-872-2711	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

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