

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000140141

1. Entity Name

SWEETWATER HOMES PAINTING, INC.



Principal Place of Business

8016 S. SUNCOAST BLVD
HOMOSASSA, FL 34446

Mailing Address

8016 S. SUNCOAST BLVD
HOMOSASSA, FL 34446



02182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3605838

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TATE, LARRY
11 BYRSONIMA CT WEST
HOMOSASSA, FL 34446

**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

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, 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 P
NAME TATE, LARRY
STREET ADDRESS 11 BYRSONIMA CT WEST
CITY-STATE-ZIP HOMOSASSA, FL 34446

TITLE VP
NAME JOHNSON, RICHARD
STREET ADDRESS 10 LINDER CIRCLE
CITY-STATE-ZIP HOMOSASSA, FL 34446

TITLE T
NAME CHRISTENSEN, ROBERT R
STREET ADDRESS 4 SHORLEAF COURT
CITY-STATE-ZIP HOMOSASSA, FL 34446

TITLE S
NAME MAUGHAN, NELSON
STREET ADDRESS 8016 S SUNCOAST BLVD
CITY-STATE-ZIP HOMOSASSA, FL 34446

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

U000000834782
02/29/08-80005-025 150.00

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry Tate

2-18-08

Date

352-382-4547

Daytime Phone #