

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000150189

Entity Name: ELLIOTT PAINTING, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

13023 PITTSFIELD AVE
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

13023 PITTSFIELD AVE
TAMPA, FL 33624

New Mailing Address:

FEI Number: 20-3786877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOTT, STACY
13023 PITTSFIELD AVE
TAMPA, FL 33624 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ELLIOTT, STACY
Address: 13023 PITTSFIELD AVE
City-St-Zip: TAMPA, FL 33624

Title: DV () Delete
Name: ELLIOTT, JAMES
Address: 13023 PITTSFIELD AVE
City-St-Zip: TAMPA, FL 33624

Title: DS () Delete
Name: ELLIOTT, TREVOR
Address: 13023 PITTSFIELD AVE
City-St-Zip: TAMPA, FL 33624

Title: DT () Delete
Name: HAMMERSLEY, PAUL
Address: 1011 CRENSHAW LK RD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: STACY ELLIOTT

DP

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date