

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002524

FILED
Apr 23, 2008
Secretary of State

Entity Name: ACCURATE CUSTOM PAINTING, INC.

Current Principal Place of Business:

5369 PARNELL ROAD
ZOLFO SPRINGS, FL 33890 US

New Principal Place of Business:

1501 N. LAKE AVE.
AVON PARK, FL 33825 US

Current Mailing Address:

5369 PARNELL ROAD
ZOLFO SPRINGS, FL 33890 US

New Mailing Address:

1501 N. LAKE AVE.
AVON PARK, FL 33825 US

FEI Number: 20-4064853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKEY, TODD M
5369 PARNELL ROAD
ZOLFO SPRINGS, FL 33890 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: PTD () Delete
Name: BARKEY, TODD M
Address: 5369 PARNELL ROAD
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: VPSD (X) Delete
Name: ROBERTS, MICHAEL L
Address: POST OFFICE BOX 1332
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: TODD M. BARKEY

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date