

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000020782

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA PAINT PROS INC

**Current Principal Place of Business:**

40 S FAIRFAX AVE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

595 E MAGNOLIA AVE  
LONGWOOD, FL 32750

**Current Mailing Address:**

40 S FAIRFAX AVE  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

595 E MAGNOLIA AVE  
LONGWOOD, FL 32750

**FEI Number:** 20-4310980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HEMPHILL, JOEL A  
40 S FAIRFAX AVE  
WINTER SPRINGS, FL 32708 US

**Name and Address of New Registered Agent:**

HEMPHILL, JOEL A  
595 E MAGNOLIA AVE  
LONGWOOD, FL 32750 US

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: JOEL HEMPILL

04/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HEMPILL, JOEL A  
Address: 595 E MAGNOLIA AVE  
City-St-Zip: LONGWOOD, FL 32750

I hereby 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 all other like empowered.

SIGNATURE: JOEL HEMPILL

D

04/04/2012

Electronic Signature of Signing Officer or Director

Date