

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000034337

FILED  
May 04, 2009  
Secretary of State

Entity Name: JAMES SHORT CUSTOM PAINTING & STAIN, INC.

**Current Principal Place of Business:**

9422 LAKE LOTTA CIRCLE  
GOTHA, FL 34734

**New Principal Place of Business:**

**Current Mailing Address:**

9422 LAKE LOTTA CIRCLE  
GOTHA, FL 34734

**New Mailing Address:**

FEI Number: 20-4531007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHORT, JAMES  
9422 LAKE LOTTA CIRCLE  
GOTHA, FL 34734    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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHORT, JAMES  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

Title: VP ( ) Delete  
Name: SHORT, STEFANIE  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

Title: S ( ) Delete  
Name: SHORT, JAMES  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

Title: T ( ) Delete  
Name: SHORT, STEFANIE  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

Title: D ( ) Delete  
Name: SHORT, JAMES  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

Title: D ( ) Delete  
Name: SHORT, STEFANIE  
Address: 9422 LAKE LOTTA CIRCLE  
City-St-Zip: GOTHA, FL 34734

**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:

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: STEFANIE SHORT

VP

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date