

2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

12 JUN 11 AM 9:44

STATE
ALACHASSEE, FLORIDA

DOCUMENT # P06000054900

1. Entity Name

THE VILLAGE PAINT SHOPPE, ~~OCOE~~, INC.

LAKE MARY



Principal Place of Business

Mailing Address

10950 WEST COLONIAL DRIVE
OCOE, FL 34761

717 CHICKAPEE TRAIL
MAITLAND, FL 32751

10615 S. SINGER
LAKE MARY, FL 32746

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05112012

Chg-P

CR2E034 (12/11)

City & State

City & State

4. FEI Number

20-2315184

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$550.00
Due by September 28, 2012

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DT
NAME LLOYD, RANDY ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME 400236165804
STREET ADDRESS 06/11/12--01002--016 ***150.00
CITY- ST- ZIP

TITLE P
NAME AYDT, ROBERT ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VPS
NAME AYDT, MARCY ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D
NAME MITCHELL, TIM ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D
NAME BENDER, JOHN ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D
NAME HARRELL, SKIP ☐ Delete
STREET ADDRESS 10956 WEST COLONIAL DRIVE
CITY- ST- ZIP OCOEE, FL 34761

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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

DATE

E-MAIL ADDRESS