## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055621

Entity Name: COLORVIVE CUSTOM FINISHES, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13386 SYLVAN AVE. 13386 SYLVAN AVENUE

FORT MYERS, FL 33919 US FORT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

13386 SYLVAN AVE. 13386 SYLVAN AVENUE

FORT MYERS, FL 33919 US FORT MYERS, FL 33919 US

FEI Number: 20-4719733 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHEETS, DONNA SHEETS, DONNA M
13386 SYLVAN AVE. 13386 SYLVAN AVENUE

FORT MYERS, FL 33919 US FORT MYERS, FL 33919 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: DONNA M. SHEETS 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VT ( ) Delete Title: VT (X) Change ( ) Addition Name: RODEN, WILLIAM B Name: RODEN, WILLIAM B

 Address:
 13386 SYLVAN AVE.
 Address:
 13386 SYLVAN AVENUE

 City-St-Zip:
 FORT MYERS, FL 33919 US
 City-St-Zip:
 FORT MYERS, FL 33919 US

Title: PSD () Delete Title: PSD (X) Change () Addition Name: SHEETS, DONNA Name: SHEETS, DONNA M

Address: 13386 SYLVAN AVE. Address: 13386 SYLVAN AVENUE
City-St-Zip: FORT MYERS, FL 33919 US
City-St-Zip: FORT MYERS, FL 33919 US

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: DONNA M. SHEETS PSD 04/21/2009