

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080390

Entity Name: J. WALLACE PAINTING, INC.

FILED
Jun 14, 2008
Secretary of State

Current Principal Place of Business:

202 SW HOLDEN TERRACE
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

4 MICHAEL ROAD
STUART, FL 34996

Current Mailing Address:

202 SW HOLDEN TERRACE
PORT ST. LUCIE, FL 34984

New Mailing Address:

4 MICHAEL ROAD
STUART, FL 34996

FEI Number: 20-5037499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, JOHN
202 SW HOLDEN TERRACE
PORT ST. LUCIE, FL 34984 US

Name and Address of New Registered Agent:

BOUHUYS, MELODY
4 MICHAEL ROAD
STUART, FL 34996 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: MELODY BOUHUYS

06/14/2008

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: WALLACE, JOHN
Address: 202 SW HOLDEN TERR
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: VP (X) Delete
Name: BOUHUYS, MELODY
Address: 4 MICHAEL ROAD
City-St-Zip: STUART, FL 34996

Title: D (X) Delete
Name: SLAYNE, MARC
Address: 157 TODD AVE
City-St-Zip: PORT ST. LUCIE, FL 34996

Title: D (X) Delete
Name: SZCZUDLO, DAVID
Address: 502 HALPATIOKEE ST., #5
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOUHUYS, MELODY
Address: 4 MICHAEL ROAD
City-St-Zip: STUART, FL 34996

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: MELODY BOUHUYS

P

06/14/2008

Electronic Signature of Signing Officer or Director

Date