

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113765

FILED
Jan 06, 2007
Secretary of State

Entity Name: LADY'S TOUCH PAINTING CO.

Current Principal Place of Business:

13423 HEALD LANE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

13423 HEALD LANE
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 20-5475685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCOTT, TRISTA K
13423 HEALD LANE
FORT MYERS, FL 33908 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCOTT, TRISTA K
Address: 13423 HEALD LANE
City-St-Zip: FORT MYERS, FL 33908 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: CRATCH, TERRI L
Address: 555 STATE STREET
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TRES () Change (X) Addition
Name: SCOTT, CHARLEE J
Address: 614 SE 8TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: SEC () Change (X) Addition
Name: SCOTT, JESSICA L
Address: 555 STATE STREET
City-St-Zip: NORTH FORT MYERS, FL 33903

I hereby certify that the information supplied with this filing does not qualify for the 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: TRISTA KAY SCOTT

P

01/06/2007

Electronic Signature of Signing Officer or Director

Date