

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000126191

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: S. MOONEY PAINTING AND REPAIR, INC.

## Current Principal Place of Business:

1 NORTH 4TH ST  
STE 206  
FERNANDINA BEACH, FL 32034 US

## New Principal Place of Business:

85675 WILSON NECK RD  
YULEE, FL 32097 US

## Current Mailing Address:

1 NORTH 4TH ST  
STE 206  
FERNANDINA BEACH, FL 32034 US

## New Mailing Address:

P O BOX 2226  
YULEE, FL 32041 US

FEI Number: 20-5653635

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOONEY, STEVEN  
85675 WILSON NECK ROAD  
YULEE, FL 32097 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: PVST ( ) Delete  
Name: MOONEY, STEVEN  
Address: 85675 WILSON NECK ROAD  
City-St-Zip: YULEE, FL 32097 US

Title: D ( ) Delete  
Name: MOONEY, STEVEN  
Address: 85675 WILSON NECK ROAD  
City-St-Zip: YULEE, FL 32097 US

Title: D ( ) Delete  
Name: CANALE III, NICHOLAS  
Address: 2977 LINDA HALL RD  
City-St-Zip: FERNANDINA BCH, FL 32034

## 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:

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: STEVEN P MOONEY

PVST

01/30/2009

Electronic Signature of Signing Officer or Director

Date