

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000126556

FILED  
Sep 04, 2007  
Secretary of State

**Entity Name:** DESIGNERS PAINTING SERVICES, INC.

**Current Principal Place of Business:**

2131 F ROAD  
LOXAHATCHEE, FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

2131 F ROAD  
LOXAHATCHEE, FL 33470 US

**New Mailing Address:**

**FEI Number:** 20-5769278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DAVIS, WINSTON  
2131 F ROAD  
LOXAHATCHEE, FL 33470 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: PRES ( ) Delete  
Name: DAVIS, WINSTON  
Address: 2131 F ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: TRES ( ) Delete  
Name: DAVIS, WINSTON  
Address: 2131 F ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: SECT ( ) Delete  
Name: DAVIS, WINSTON  
Address: 2131 F ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: DIR ( ) Delete  
Name: DAVIS, WINSTON  
Address: 2131 F ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

**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:

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:** WINSTON DAVIS

PRES

09/04/2007

Electronic Signature of Signing Officer or Director

Date