2007 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 27, 2007 8:00 am Secretary of State DOCUMENT # P06000136172 04-23-2007 90101 023 ***150.00 GLENN C BENEDICT PAINTING INC Principal Place of Business Mailing Address 5310 ANDRISCT PO BOX 495412 5310 ANDRISCT // 50 Junrught St 66021500 NORTH PORT, FL 34288 US NORTH PORT, FL 2. Principal Place of Business - No P.O. Box# 1150 Juniah St 3. Mailing Address 08232007 CR2E034 (12/06) Chg-P Applied For 4. FEI Number Charlotte, Fl Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BENEDICT, GLENN C Street Address (P.O. Box Number is Not Acceptable) 5310 ANDRIS CT NORTH PORT, FL 34288 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWI!! FEE IS \$550.00 \Box Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ☐ Addition BENEDICT, GLENN C NAME NAME STREET ADDRESS 5310 ANDRIS CT STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34288 CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: CER OR DIRECTOR Daytyme Phone

Date

FILED

ATTACHMENT 66021500 060001361

Glenn C. Benedict Painting, Inc. Po Box 495412 Port Charlotte, FL. 33949

August 21,2007

Division of Corporations PO Box 1500 Tallahassee,FL. 32302-1500

To Whom It Ma Concern:

Per a phone conversation with one of your employess on Wednesdday August 7,2007 I am enclosing a new updated form for the corporation Annual report with my FEIN number written onto the form. I am also enclosing a copy of the canceled check from my bank as to witness that I did indeed pay for the annual taxes on the business as of April 20, 2007. I was not aware nor did I receieve any other corrispondence from you regarding the fact that you didnt have my FEIN number on file. I thought that I had sent the number and that it was indeed on file with your office so i am therfore asking that you lift the \$400.00 late fee for the corporation and release the dissolution off the corporation as well as I did pay the taxes on time and am enclosing the FEIN that your office requested as well over the phone. Could you please send me some kind of return letter stating that this has been done and that all is lifted and that m business isnt at risk for being dissolved or being charged any late fees either. Thank you for your time and help with this matter.

> Sincerely, Glenn C Benedict-Owner Glenn C. Benedict Painting Inc.

ATTACHMENT 66021500 #P060001-36172

Gleens Benedict Painting Inc.

Gleens Sarah Benedict

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