

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140459

FILED  
Jun 15, 2009  
Secretary of State

Entity Name: J.B.'S PAINTING & PAPERHANGING INC

## Current Principal Place of Business:

216 S.E. 150TH AVE LOT#45  
OLD TOWN, FL 32680

## New Principal Place of Business:

1651 5TH AVE  
VERO BEACH, FL 32960

## Current Mailing Address:

P.O. BOX 936  
OLD TOWN, FL 32680

## New Mailing Address:

1651 5TH AVE  
VEOR BEACH, FL 32960

FEI Number: 11-3782569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CARLTON, AMANDA  
216 S.E. 150TH AVE LOT#45  
OLD TOWN, FL 32680 US

## Name and Address of New Registered Agent:

CARLTON, AMANDA  
1651 5TH AVE  
VERO BEACH, FL 36960 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: AMANDA CARLTON

06/15/2009

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: BAUD, JOSHUA  
Address: 11091 NE 107TH TERR  
City-St-Zip: ARCHER, FL 32618

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BAUD, JOSHUA  
Address: 1651 5TH AVE  
City-St-Zip: VERO BEACH, FL 32960

Title: VP ( ) Change (X) Addition  
Name: BAUD, JEREMY H  
Address: 75 SW 75TH STREET APT#F-10  
City-St-Zip: GAINESVILLE, FL 32607

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: AMANDA CARLTON

RA

06/15/2009

Electronic Signature of Signing Officer or Director

Date