

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000146933

Entity Name: FRAME FINISHERS, INC.

FILED
Jul 09, 2008
Secretary of State

Current Principal Place of Business:

9140 GOLFSIDE DRIVE
STE 10
JACKSONSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9140 GOLFSIDE DRIVE
STE 10
JACKSONSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-8013209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHACON, REBECCA
9140 GOLFSIDE DRIVE
STE 10
JACKSONSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

AMMONS, JODY M PRES
9140 GOLFSIDE DRIVE
STE 10
JACKSONSONVILLE, FL 32256 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: JODY M AMMONS

07/09/2008

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: PD () Delete
Name: CHACON, EDDIE
Address: 9140 GOLFSIDE DRIVE STE 10
City-St-Zip: JACKSONSONVILLE, FL 32256

Title: VD (X) Delete
Name: AMMONS, JODY
Address: 9140 GOLFSIDE DRIVE STE 10
City-St-Zip: JACKSONSONVILLE, FL 32256

Title: ST (X) Delete
Name: CHACON, REBECCA
Address: 9140 GOLFSIDE DRIVE STE 10
City-St-Zip: JACKSONSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: AMMONS, JODY M PRES
Address: 9140 GOLFSIDE DRIVE STE 10
City-St-Zip: JACKSONSONVILLE, FL 32256

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: JODY M AMMONS

PRES

07/09/2008

Electronic Signature of Signing Officer or Director

Date