

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104131

Entity Name: HANDLOS PAINTING INC.

FILED
Jul 25, 2009
Secretary of State

Current Principal Place of Business:

646 PARK VALLEY CIRCLE
MINNEOLA, FL 34715

New Principal Place of Business:

9207 PARTRIDGE RUN DR.
LAKE WALES, FL 33859

Current Mailing Address:

646 PARK VALLEY CIRCLE
MINNEOLA, FL 34715

New Mailing Address:

9207 PARTRIDGE RUN DR.
LAKE WALES, FL 33859

FEI Number: 94-3454975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANDLOS, JAMES M
646 PARK VALLEY CIRCLE
MINNEOLA, FL 34715 US

Name and Address of New Registered Agent:

HANDLOS, JAMES M
9207 PARTRIDGE RUN DR.
LAKE WALES, FL 33859 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:

07/25/2009

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: HANDLOS, JAMES M
Address: 646 PARK VALLEY CIRCLE
City-St-Zip: MINNEOLA, FL 34715

Title: S () Delete
Name: HANDLOS, JAMES M
Address: 646 PARK VALLEY CIRCLE
City-St-Zip: MINNEOLA, FL 34715

Title: T () Delete
Name: HANDLOS, JAMES M
Address: 646 PARK VALLEY CIRCLE
City-St-Zip: MINNEOLA, FL 34715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, (X) Change () Addition
Name: HANDLOS, JAMES M
Address: 9207 PARTRIDGE RUN DR.
City-St-Zip: LAKE WALES, FL 33859

Title: S (X) Change () Addition
Name: HANDLOS, JAMES M
Address: 9207 PARTRIDGE RUN DR.
City-St-Zip: LAKE WALES, FL 33859

Title: T (X) Change () Addition
Name: HANDLOS, JAMES M
Address: 9207 PARTRIDGE RUN DR.
City-St-Zip: LAKE WALES, FL 33859

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: JAMES M. HANDLOS

PRES

07/25/2009

Electronic Signature of Signing Officer or Director

Date