


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 28, 2004 08:00 AM
Secretary of State**

DOCUMENT # P93000010028
1. Entity Name
WILLIAM BALLANTYNE PAINTING, INC.



Principal Place of Business 3004 NEW JERSEY LAKELAND, FL 33801 US	Mailing Address PO BOX 1182 N/A EATON, FL 33840 US
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DO NOT WRITE IN THIS SPACE



04042004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3161429	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALLANTYNE, WILLIAM
3004 NEW JERSEY
LAKELAND, FL 33801

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IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BALLANTYNE, WILLIAM 3004 NEW JERSEY LAKELAND, FL 33801
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04/28/04-80029-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William J. Ballantyne 4/24/04 863-665-0769
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #