2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P93000010028** 1. Entity Name WILLIAM BALLANTYNE PAINTING, INC. Principal Place of Business Mailing Address

6. Name and Address of Current Registered Agent

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



04042004



US

PO BOX 1182 N/A

EATON, FL 33840

|--|

4. FEI Number	 Applied For
59-3161429	Not Applicable

CR2E034 (10/03)

\$8.75 Additional 5. Certificate of Status Desired Fee Required

BALLANTYNE, WILLIAM 3004 NEW JERSEY

3004 NEW JERSEY LAKELAND, FL 33801

## DO NOT WRITE

No Chg-P

	LAKELAND, FL 33801		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							
	E NOW!!! FEE IS \$150.00 by 1, 2004 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	eing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE	PSD						
NAME	BALLANTYNE, WILLIAM						
STREET ADDRESS	3004 NEW JERSEY						
CITY-ST-ZIP	LAKELAND, FL 33801	· · · · · · · · · · · · · · · · · · ·					
TITLE							
NAME							
STREET ADDRESS					U00000134678		
CITY-ST-ZIP					U00000134678 .U4/28/04-80029-005 150.00		
TITLE							
NAME							
STREET ADDRESS				חח	NOT WRITE		
CITY-ST-ZIP				50	NOI WILL		
TITLE				IN '	THIS SPACE		
NAME				11.4	THIS OF AGE		
STREET ADDRESS							
CITY-ST-ZIP							
TITLE							
NAME.							
STREET ADDRESS							
CITY-ST-ZIP							
TITLE	-						
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filling 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.							