

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMMIE H. MURPHY
Secretary of State
1000 FIVE STAR BOULEVARD, SUITE 100
TALLAHASSEE, FLORIDA 32304-0001

APPROVED
AND
FILED

95 MAY -1 PM 2:13

DOCUMENT # P93000022960 (7)

1. Corporation Name

LEGER PAINTING INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Information for the corporation		2a. Mailing Address	
21. 1109 S. BLVD		535 EMPRESS WAY LAKELAND FL 33803	
22. State - Apt. # etc.		27. State - Apt. # etc.	
23. LAKELAND, FL.		28. LAKELAND, FL.	
24. 33803		29. 33803	
3. Date first incorporated or qualified		3a. Date of Last Report	
03/25/1993		05/01/1994	
4. Filing Number		Applied for Not Applicable	
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 190.034, Florida Statutes		☐ Yes ☐ No	

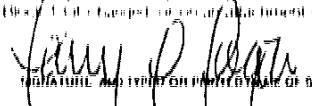
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LEGER, MARLA 535 EMPRESS WAY LAKELAND FL 33803		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	
		FL 85. Zip Code	

11. Pursuant to the provisions of Sections 7, 190.03, and 190.04, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a Florida citizen and I accept the designation as such under 190.03, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	DP LEGER, LARRY	1. NAME	☐ Change ☐ Addition
STREET ADDRESS	535 EMPRESS WAY	2. NAME	
CITY, STATE, ZIP	LAKELAND FL	3. STREET ADDRESS	
NAME	DS LEGER, MARLA	4. CITY, STATE, ZIP	
STREET ADDRESS	535 EMPRESS WAY	5. NAME	Y P KEITH CHEWNING ☒ Change ☐ Addition
CITY, STATE, ZIP	LAKELAND FL	6. STREET ADDRESS	1109 S. BLVD
NAME	VP REED, ELLIOTT	7. CITY, STATE, ZIP	LAKELAND FL, 33803
STREET ADDRESS	4822 RUSHING RD	8. NAME	Y P MIKE CHEWNING ☒ Change ☐ Addition
CITY, STATE, ZIP	LAKELAND FL	9. STREET ADDRESS	1109 S BLVD
NAME		10. CITY, STATE, ZIP	LAKELAND, FL, 33803
STREET ADDRESS		11. NAME	☐ Change ☐ Addition
CITY, STATE, ZIP		12. NAME	
STREET ADDRESS		13. STREET ADDRESS	
CITY, STATE, ZIP		14. CITY, STATE, ZIP	
NAME		15. NAME	☐ Change ☐ Addition
STREET ADDRESS		16. STREET ADDRESS	
CITY, STATE, ZIP		17. CITY, STATE, ZIP	
NAME		18. NAME	☐ Change ☐ Addition
STREET ADDRESS		19. STREET ADDRESS	
CITY, STATE, ZIP		20. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.03, Florida Statutes. I further certify that this form also is required in the annual report or application for annual renewal of the corporation's charter and that my signature and that of the corporation's officer or officers authorized to sign on behalf of the corporation are required for the filing of this report or application for annual renewal of the corporation's charter under the provisions of Chapter 661, Florida Statutes, and that my name appears in Block 1 of Block 1 of the report or application filed with an address.

SIGNATURE:  5-1-95 (813) 616-9628