2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000043382

Entity Name: TOPLIFF PAINTING, INC.

17413 INGRAM RD.

TOPLIFF, KATHY

FORT MYERS, FL 33912

() Delete

Address:

Title:

Name:

City-St-Zip:

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17571 ROCKERFELLER CIR FORT MYERS, FL 339125805 **Current Mailing Address: New Mailing Address:** 574 SANFORD DR. 542 PRATHER DR. FORT MYERS, FL 339193130 FORT MYERS, FL 339193134 FEI Number: 65-0428203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOPLIFF, JACK E JR TOPLIFF, JACK E JR 574 SANFORD DR. 542 PRATHER DR. FORT MYERS, FL 33919 US FORT MYERS, FL 33919 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: 04/17/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition Title: () Delete Title: TOPLIFF, JACK E JR TOPLIFF, JACK E JR Name: Name: 574 SANFORD DR. 542 PRATHER DR. Address: Address: FORT MYERS, FL 339193130 City-St-Zip: FORT MYERS, FL 339193134 City-St-Zip: VΡ Title: Title: () Delete () Change () Addition TOPLIFF, ROBERT Name: Name:

Address:

Title:

Name:

City-St-Zip:

ST

TOPLIFF, KATHY

(X) Change () Addition

574 SANFORD DR. 542 PRATHER DR. Address: Address: City-St-Zip: FORT MYERS, FL 339193134 City-St-Zip: FORT MYERS, FL 339193130 Title: () Delete Title: (X) Change () Addition TOPLIFF, MICHAEL TOPLIFF, MICHAEL Name: Name: 2936 SANTA BARBARA PLACE, #C Address: Address: 542 PRATHER DR. City-St-Zip: City-St-Zip: FORT MYERS, FL 33904 FORT MYERS, FL 33919

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 TOPLIFF, TODD

 Address:
 Address:
 833-F MEADOWLAND DR.

 City-St-Zip:
 City-St-Zip:
 NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHY TOPLIFF ST 04/17/2006