FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 10: 04

DOCUMENT # P93000043726 (7)

1. Corporation Name
BLUEGRASS PAINTING INC.

Principal Place of Business
4842 BEACON ST.
ORLANDO FL 32808

Mailing Address
4842 BEACON ST.
ORLANDO FL 32808

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/16/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3188674 ☐ 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. 199.032, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
BAUGH, FRANCES L
4842 BEACON ST.
ORLANDO FL 32808

10. Name and Address of New Registered Agent
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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAUGH, FRANCES L
STREET ADDRESS	4842 BEACON ST.
CITY-ST-ZIP	ORLANDO FL 32808

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☒ Change ☐ Addition
1.2 NAME	BAUGH, Frances L.	
1.3 STREET ADDRESS	4842 Beacon St.	
1.4 CITY-ST-ZIP	Orlando, Fl. 32808	
2.1 TITLE	~~James~~ VP	☐ Change ☒ Addition
2.2 NAME	Baugh, James S.	
2.3 STREET ADDRESS	4750 Nantucket Ln.	
2.4 CITY-ST-ZIP	Orlando, Fl. 32808	
3.1 TITLE	V	☐ Change ☒ Addition
3.2 NAME	Cohoon, Carl,	
3.3 STREET ADDRESS	4406 MARTIN'S WAY APT A	
3.4 CITY-ST-ZIP	ORLANDO, Fl 32808	
4.1 TITLE	S	☐ Change ☒ Addition
4.2 NAME	Miller, Mack	
4.3 STREET ADDRESS	4842 Beacon St.	
4.4 CITY-ST-ZIP	Orlando, Fl. 32808	
5.1 TITLE	T	☐ Change ☒ Addition
5.2 NAME	Cooley, Mark	
5.3 STREET ADDRESS	4420 Martins Way, Apt. C	
5.4 CITY-ST-ZIP	Orlando, Fl. 32808	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Frances Baugh, President
Frances L. Baugh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/95 Date
407-296-9850 Daytime Phone #

0417652 FP