

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000062593 (7)

1. Corporation Name

A & S PAINT SPECIALTY CONTRACTORS, INC.

Principal Place of Business

2602 SEMINOLE COURT
LAKE CITY FL 32055

Mailing Address

1000
P.O. DRAWER 1000
STARKE FL 32091



2. Principal Place of Business

2a. Mailing Address

21 RT. 12 Box 160
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 OAK LAKE
City & State

27 City & State

23 LAKE CITY FL.
Zip

28 Zip

24 32025 Country
25 USA

29 Country
30

9. Name and Address of Current Registered Agent

LEUKEL, JEFFREY M
996 N. TEMPLE AVENUE
STARKE FL 32091

3. Date Incorporated or Qualified

08/18/1993

3a. Date of Last Report

04/14/1995

4. FEI Number

59-3203951

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

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

Signature, Agent or principal of registered agent and the corporation.

NOTE: Registered Agent signature and address required.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
ADAMS, DEWEY H
2602 SEMINOLE COURT
LAKE CITY FL 32055

☐ DELETE

D
ADAMS, DEKOVEN R
ROUTE 12, BOX 64-C
LAKE CITY FL 32055

☐ DELETE

D
ADAMS, MICHAEL D
ROUTE 12, BOX 160
LAKE CITY FL 32055

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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:

Michael D. Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-96

904-752-7493

CR2E034 (12/95)