## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P94000023211

City-St-Zip: HOLIDAY, FL 346913155

Entity Name: DAVE & JOHNS PAINTING INC.

FILED Sep 11, 2002 Secretary of State

| -   |   |   |   |                                      |
|---|---|---|---|--------------------------------------|
| Current P                                   | rincipal Place  | of Business:  | New Principal Place o                       | of Business:                         |
| 3147 MUIF<br>HOLIDAY,                       | R STREET<br>FL 34691315                                 | 5 US  |   |                                      |
| Current Mailing Address:                    |   |   | New Mailing Address                         | :                                    |
| 3147 MUIF<br>HOLIDAY,                       | R STREET<br>FL 34691315                                 | 5   | P.O. BOX 3794<br>HOLIDAY, FL 34691          |                                      |
| FEI Number:                                 | : 59-3231828  | FEI Number Applied For()  | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )    |
| Name and                                    | Address of C  | urrent Registered Agent:  | Name and Address of                         | New Registered Agent:                |
| 3147 MUIF<br>HOLIDAY,<br>The above          | FL 34691315   | 5 US  | purpose of changing its registered          | office or registered agent, or both, |
| SIGNATU                                     | RE:   |   |   |                                      |
|   |   | ic Signature of Registered Ag   | ent   | Date                                 |
| Election Car                                |   | o satisfy its Intangible Tax filing red<br>g Trust Fund Contribution ( ). |   | S TO OFFICERS AND DIRECTORS:         |
|   |   |   |   |                                      |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PSD ()<br>WADSWORTH,<br>245 CANBY CIF<br>SPRING HILL, I | र   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition              |
| Title:<br>Name:<br>Address:                 | VD ()<br>GROGAN, AND<br>3147 MUIR STE                   |   | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition              |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: | : DAVID WADSWORTH | PSD | 09/11/2002 |
|------------|-------------------|-----|------------|
| SIGNATURE: | : DAVID WADSWORTH | PSD | 09/11/2002 |