

DOCUMENT # P94000035773

1. Entity Name
TARTAN COLOR & CHEMICAL, INC.



FILED
Jan 19, 2007 08:00 AM
Secretary of State

Principal Place of Business
2100 S TAMiami TRAIL
STE 100
SARASOTA, FL 34239-3803 US

Mailing Address
2100 S TAMiami TRAIL
STE 100
SARASOTA, FL 34239-3803 US



01152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0526518	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CROY, LARRY E.
2100 SOUTH TAMiami TRAIL
STE 100
SARASOTA, FL 34239

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HOUSTON, ROBERT W
STREET ADDRESS	5780 MIDNIGHT PASS RD., #408B
CITY-ST-ZIP	SARASOTA, FL
TITLE	DST
NAME	CROY, LARRY E.
STREET ADDRESS	2100 S. TAMiami TRL STE #100
CITY-ST-ZIP	SARASOTA, FL
TITLE	DVP
NAME	HOUSTON, DAVID R
STREET ADDRESS	5780 MIDNIGHT PASS RD., #408B
CITY-ST-ZIP	SARASOTA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/22/07-80043-025 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY E. CROY
SIGNATURE OF REGISTERED NAME OF SIGNING OFFICER OR DIP