

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

OFFICE OF THE
SECRETARY OF STATE
1995



FLORIDA DEPARTMENT OF STATE
Suzanne B. McPherson
Secretary of State
Tallahassee, Florida 32399-0001

FILED
OFFICE OF THE SECRETARY OF STATE
CORPORATIONS

05 MAY -1 PM 2:30

DOCUMENT # **P94000073023 (1)**

JIM'S PAINTING, INC.

Principal Office Address		Mailing Address	
7463 BRYAN RD ORLANDO FL 32807		7463 BRYAN RD ORLANDO FL 32807	
3. Date of incorporation		3a. Date of last report	
10/03/1994			

21. Principal Office Address	2a. Mailing Address	4. Filing Number	Application Fee
7463 BRYAN RD	7463 BRYAN RD	593271294	Not Applicable
22. State and ZIP	27. State and ZIP	5. Certificate of Status Desired	\$8.75 Additional Fee Required
FL 32807	FL 32807	<input type="checkbox"/>	
23. City and State	28. City and State	6. Election Campaign Financing Fund Contribution	\$5.00 May Be Added to Firms
ORLANDO FL	ORLANDO FL	<input type="checkbox"/>	
24. County	29. Zip	30. County	8. This corporation has liability for ad valorem tax under 1991 U.S. Florida Statutes.
Orange	32807	Orange	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JOHNSON, JAMES H 7463 BRYAN RD ORLANDO FL 32807				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City		
				FL	B5. Zip Code		

11. Pursuant to the provisions of Sections 607.0605 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the principal office in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, it certifies that the corporation is in compliance with the provisions of Sections 607.0605, Florida Statutes.

STATEMENT OF THE REGISTERED AGENT AND THE CORPORATION

12. OFFICERS AND DIRECTORS		13. ADDITIONAL NAMES OF OFFICERS AND DIRECTORS	
DP	JOHNSON, JAMES H 7463 BRYAN RD ORLANDO FL 32807	1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
DT	PIERCE, DAVID B II 7463 BRYAN RD ORLANDO FL 32807	2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
V	HUGG, CHARLES F 7463 BRYAN RD ORLANDO FL 32807	3. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
S	PIERCE, MELISSA V 7463 BRYAN RD ORLANDO FL 32807	4. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		6. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		7. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		8. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		9. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		10. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add

14. I, the undersigned, hereby certify that the information required by this filing is accurately furnished and is true and correct for the corporation named on this form. I further certify that the information is complete and correct as of the date of filing and that the corporation is in compliance with the provisions of Sections 607.0605, Florida Statutes.

SIGNATURE: *David B. Pierce* David B Pierce 4-27-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REMITTED BY MAY 1