

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000015401 (9)

1. Corporation Name
SUPERIOR PAINTING & CONTRACTING, INC.



Principal Place of Business: **1804 N.W. 2ND PLACE CAPE CORAL FL 33904** **1826 NE 5 Ave Cape Coral, FL 33909**
 Mailing Address: **1804 N.W. 2ND PLACE CAPE CORAL FL 33904** **1826 NE 5 Ave Cape Coral, FL 33909**

2. Principal Place of Business 21 1826 NE 5th Ave. Suite, Apt. #, etc.		2a. Mailing Address 26 1826 NE 5th Ave. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 02/23/1995		3a. Date of Last Report	
22 City & State Cape Coral, FL		27 City & State Cape Coral, FL		4. FEI Number 65-0565346		Applied For Not Applicable	
23 Zip 33909		28 Zip 33909		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
25 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent DIEHL, BRET A 1804 N.W. 2ND PLACE CAPE CORAL FL 33904				10. Name and Address of New Registered Agent 81 Name Leonard Ball 82 Street Address (P.O. Box Number is Not Acceptable) RR 1, Box 594 1826 NE 5th Ave 83 Cape Coral, Fla 33909 84 City Vaxinos, PA 19860 FL 85 Zip Code 14860			
---	--	--	--	---	--	--	--

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 607.0503, Florida Statutes.

SIGNATURE: **Leonard Ball III v.p.** Date: **7/23/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT DIEHL, BRET 1804 N.W. 2ND PLACE CAPE CORAL FL 33904 <input type="checkbox"/> DELETE	1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DIEHL, KATHLEEN 1804 N.W. 2ND PLACE CAPE CORAL FL 33904 <input checked="" type="checkbox"/> DELETE	5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Leonard Ball, III 1826 Nw 5th Avenue Cape Coral, FL 33909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	25. TITLE 26. NAME 27. STREET ADDRESS 28. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	29. TITLE 30. NAME 31. STREET ADDRESS 32. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	33. TITLE 34. NAME 35. STREET ADDRESS 36. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	37. TITLE 38. NAME 39. STREET ADDRESS 40. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	45. TITLE 46. NAME 47. STREET ADDRESS 48. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	49. TITLE 50. NAME 51. STREET ADDRESS 52. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	53. TITLE 54. NAME 55. STREET ADDRESS 56. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	57. TITLE 58. NAME 59. STREET ADDRESS 60. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 filing 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 registered or trustee employee, or 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: **Leonard Ball III** President **6/18/96** **7172804332**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)