

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90076 024 ***150.00

DOCUMENT # P95000017082

1. Entity Name

ADAM'S PAINTING OF SOUTHWEST FLORIDA, INC.



Principal Place of Business

222 22ND ST., NE
BRADENTON FL 34208
US

Mailing Address

222 22ND ST., NE
BRADENTON FL 34208
US

2. Principal Place of Business

222 - 22nd St NE

Suite, Apt. #, etc.

3. Mailing Address

222 22nd St NE

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Bradenton, FL

City & State

Bradenton, FL

4. FEI Number

65-0529691

Applied For

Not Applicable

Zip

34208

Country

USA

Zip

34208

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GILICK, ADAM V
222 22ND ST., NE
BRADENTON FL 34208

7. Name and Address of New Registered Agent

Name

Adam V. Gillick

Street Address (P.O. Box Number is Not Acceptable)

222 22nd St NE

City

Bradenton

FL

Zip Code

34208

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME GILICK, ADAM V
STREET ADDRESS 222 22ND ST., NE
CITY-ST-ZIP BRADENTON FL 34208 ☐ Delete

TITLE ST
NAME GILICK, JOANNE
STREET ADDRESS 222 22ND ST., NE
CITY-ST-ZIP BRADENTON FL 34208 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Joanne Gillick

Sec.

1-28-04

Date

Daytime Phone #

941-377-0263
941-708-092