

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024313

FILED  
Sep 04, 2012  
Secretary of State

**Entity Name:** JOHN MCCANDLESS PAINTING, INC.

**Current Principal Place of Business:**

6134 ADKINS AVE  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

6134 ADKINS AVE  
NAPLES, FL 34112

**New Mailing Address:**

**FEI Number:** 65-0598298

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCANDLESS, JOHN  
6134 ADKINS AVE.  
NAPLES, FL 34112 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCCANDLESS, JOHN  
Address: 6134 ADKINS AVE  
City-St-Zip: NAPLES, FL 34112

Title: S  
Name: OPP, MADONNA L  
Address: 6134 ADKINS AVE  
City-St-Zip: NAPLES, FL 34112

Title: VP  
Name: NOCERA, ROBERT L  
Address: 270 11TH ST. N.W.  
City-St-Zip: NAPLES, FL 34120

Title: TRES  
Name: SMITH, DOUGLAS B  
Address: 4080 MARINER LN.  
City-St-Zip: BONITA SPRINGS, FL 34134 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN MCCANDLESS

PRES

09/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date