

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000025020

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: H & S PAINTING COMPANY, INCORPORATED

## Current Principal Place of Business:

4081 L.B. MCLEOD ROAD  
SUITE F  
ORLANDO, FL 32811

## New Principal Place of Business:

1430 W. ANDERSON STREET  
ORLANDO, FL 32805 US

## Current Mailing Address:

4081 L.B. MCLEOD ROAD  
SUITE F  
ORLANDO, FL 32811

## New Mailing Address:

1430. ANDERSON STREET  
ORLANDO, FL 32805 US

FEI Number: 59-3306189

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVISON, LAURA  
6041 SAND PINE EST BLVD  
ORLANDO, FL 32811 US

## Name and Address of New Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS, IN  
2471 E SEMORAN BLVD  
ORLANDO, FL 32703 US

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: DANIEL ALVAREZ

04/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DAVISON, LAURA D  
Address: 6041 SAND PINES EST BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: VP ( ) Delete  
Name: DAVISON, PETER J  
Address: 6041 SAND PINES EST BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: S ( ) Delete  
Name: DAVISON, LAURA D  
Address: 6041 SAND PINES EST BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: T ( ) Delete  
Name: DAVISON, PETER J  
Address: 6041 SAND PINES EST BLVD  
City-St-Zip: ORLANDO, FL 32819

Title: COB ( ) Delete  
Name: DAVISON, LAURA D  
Address: 6041 SAND PINES EST BLVD  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LAURA DAVISON

P

04/10/2006

Electronic Signature of Signing Officer or Director

Date