## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000035118 (5)

PAINTING UNLIMITED OF THE VILLAGES, INC.

## **FILED** Apr 22 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Ad	oress				
1185 DEL TORO LADY LAKE FL 32159		1165 DEL TORO LADY LAKE FL 32159				DO NOT MOUTE METHORS	140E
						DO NOT WRITE IN THIS SE	ACE
						3. Date Incorporated or Qualified	
						05/01/1995	
<ol><li>Principal Plant</li></ol>	ac <b>e of</b> Business	2a, Mailinç	2a. Mailing Address			4. FEI Number	Applied For
ri		26				59-3318764	Not Applicable
Suite, Apt. #, etc.		<u></u> ⊢¬ '	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State			6. Election Campaign Financing	\$5.00 May Be
20		28	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the curre	nt year Intangible
24	25	29		30			Yes No
	9. Name and Address of Curre	nt Registered A	gent			10. Name and Address of New Registered Ag	gent
JOH	INSON, CHARLES D			81	Name		
	WEBSTER ST.			82	Cive et Ar	ddress (P.O. Box Number is Not Acceptable)	
	SBURG FL 34748			102	Sireel At	ddiess (P.O. Box Number is Not Acceptable)	
	0001101201110			83			
2.7	:			84	City	FL	85 Zip Code
44 Durayani t	a the provinces of Sections 607.06		L Etorida Statu	les the above	e-named o	properation submits this statement for the surpage of a	hanging its registered
office or re	egi <b>ster</b> ed agent, or both, in the Stat	e of Florida, Suc	h change was	authorized by	the corpo	organion's board of directors. I hereby accept the appoi	ntment as registered
agent. Far	n familiar with, and accept the obli	gations of, Sectic	ırı 607. <b>0505,</b> Fl	orida Statute:	S.		
SIGNATURE .						DATE	
	Signature, typed or printed name of registered a	VD DIRECTORS	JE UNU		ant signature ro	parte ADDITIONS/CHANGES TO OFFICERS AND I	DIDECTORS IN 12
TITLE	D	VI) DINEOTONO	DELETE	13.	<del></del>	The state of the s	Change Addition
1	HUNTER, BOB		[_] OLLCIE	1.2 NAME		-	T chieffe D riderion
NAME	1165 DEL TORO						
STREET ADDRESS				1.3 STREET			
CITY-ST-ZIP	LADY LAKE FL 32159		D bei ere	1.4 CITY - 9	T-ZIP		Change   Addition
TITLE	D DELETE		2.1 TITLE		L	Change Addition	
NAME	HUNTER, JOYCE			2.2 NAME			
STREET ADDRESS	1165 DEL TORO			2.3 STREET	ADDRESS		
CITY ST-ZIP	LADY LAKE FL 32159			2. 4 CITY-	ST-ZIP	¥II	
TITLE			☐ DEŁE <b>té</b>	3 1 TITLE		ι	] Change
NAME				32 NAME	ł		
STREET ADDRESS				3 3 STREET	ADDRESS		
CITY-ST-ZIP				3 4. CiTY-	ST-ZIP		
TITLE			DELETE	4 1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAME	- 1		
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP		
TITLE			DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREE	ADDRESS		
1				5.4 CITY-5	1		
CITY-ST-ZIP			DELETE	6.1 TITLE	11-511		Change Addition
TITLE			Propi OLCUIC		]	_	
NAME				6.2 NAME			
STREET ADDRESS					F ADDRESS		
CITY-ST-ZIP				6.4 C(TY -	S1 - ZIP		

14. 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 annual report or supplemental annual 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 trusted empowered 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.