

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000072285

Entity Name: TRISSLER PAINTING, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

760 20TH AVENUE NORTHWEST
NAPLES, FL 33964

New Principal Place of Business:

760 20TH AVENUE NORTHWEST
NAPLES, FL 34120 US

Current Mailing Address:

760 20TH AVENUE NORTHWEST
NAPLES, FL 33964

New Mailing Address:

760 20TH AVENUE NORTHWEST
NAPLES, FL 34120 US

FEI Number: 65-0611009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRISSLER, THOMAS M
760 20TH AVENUE NORTHWEST
NAPLES, FL 33964 US

Name and Address of New Registered Agent:

TRISSLER, THOMAS M
760 20TH AVENUE NORTHWEST
NAPLES, FL 34120 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:

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: TRISSLER, THOMAS
Address: 760 20TH AVE NW
City-St-Zip: NAPLES, FL

Title: S () Delete
Name: TRISSLER, CAROLYN
Address: 760 20 AVE.
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: TRISSLER, THOMAS
Address: 760 20TH AVE NW
City-St-Zip: NAPLES, FL 34120 US

Title: S (X) Change () Addition
Name: TRISSLER, CAROLYN
Address: 760 20 AVE.
City-St-Zip: NAPLES, FL 34120 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS TRISSLER

PT

04/14/2005

Electronic Signature of Signing Officer or Director

Date