

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000072285

Entity Name: TRISSLER PAINTING, INC.

FILED  
Apr 18, 2008  
Secretary of State

**Current Principal Place of Business:**

760 20TH AVENUE NORTHWEST  
NAPLES, FL 34120 US

**New Principal Place of Business:**

**Current Mailing Address:**

760 20TH AVENUE NORTHWEST  
NAPLES, FL 34120 US

**New Mailing Address:**

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 34120 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: THOMAS M. TRISSLER

PT

04/18/2008

Electronic Signature of Signing Officer or Director

Date