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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000010064

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90089 004 \*\*\*150.00

STUARTS PAINTING, INC.							
Principal Place of Business	Mailing Address				•		
3607 WOODHILL DR.  BRANDON FL 33511  3607 WOODHILL DR.  BRANDON FL 33511				DO NOT WRI	TE IN THIS SP	ACE	
				01/29/1996			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 59-3360608		• ——-	oplied For ot Applicable
Suite, Apt. #, etc.	26   Suite, Apt. #, etc.   27			5. Certifcate of Status Desired		T	Additional equired
City & State	City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip Country		Country	/	This corporation owes the cur Personal Property Tax.		] Yes	No
9. Name and Address of Curr	E			10. Name and Address of New	Registered Ag	ent .	<u> </u>
STUART, PHILIP D		81	1	dress (P.O. Box Number is Not Accept	table)		
3607 WOODHILL DR. BRANDON FL 33511		82	Street Ad	daress (P.O. Box Number is Not Accept			
		83	3				
		84	1 1		FLI		Code
Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli	502 and 607.1508, Florida Statutes, t te of Florida. Such change was autho gations of, Section 607.0505, Florida	the abor orized by Statute	ve-named co y the corpora s.	orporation submits this statement for the ation's board of directors. I hereby acceptation's	a purpose of che pt the appoints	anging it nent as r	s registered egistered
SIGNATURE Signature, typed or printed name of registered	exact and title if anylinable (NOTE: Reg	istered Ap	ent signature requ	uired when reinstating)	DATE		
OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO O			
TITLE DP	☐ DELETE	1.1 TITLE			. 1	☐ Change	Addition
NAME STUART, PHILIP D		1.2 NAME					
3607 WOODHILL DR		1.3 STRE	ET ADDRESS				

SIGNATURE	functional post and title if applicable (NO)	E: Registered Agent signature req	uired when reinstating)	DATE		
	Signature, typed or printed name of registered agent and title if applicable. (NO OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECTO	RS IN 12
12.	C) OF FTE	1.1 TITLE			☐ Change	· Addition
TITLE	Ur —	1.2 NAME				
NAME	STUART, PHILIP D	1.3 STREET ADDRESS				
STREET ADORESS	3607 WOODHILL DR.	1				
CITY-ST-ZIP	BRANDON FL 33511	1.4 CiTY-ST-ZiP		_	☐ Change	Addition
TITLE	DT DELETE	2.1 TITLE			_	
NAME	STUART, BRIAN P	2.2 NAME				
STREET ADDRESS	3607 WOODHILL DR.	2.3 STREET ADORESS	·			
CITY-ST-ZIP	BRANDON FL 33511	2. 4 CITY-ST-ZIP			Change	Addition
TITLE	DS DELETE	3.1 TITLE		•		
NAME	STUART, JEFFERY A	. 3.2 NAME	1			
STREET ADDRESS	3607 WOODHILL DR.	3.3 STREET ADDRESS				
CITY-ST-ZIP	BRANDON FL 33511	3.4. CITY-ST-ZIP			Change	Addition
TITLE	DELETE	4.1 TITLE			☐ Criainge	
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
		4.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	DELETE	5.1 TITLE			Change	☐ Addition
		5.2 NAME				
NAME		5.3 STREET ADDRESS				
STREET ADORESS		5.4 CITY-ST-ZIP		·	·	
CITY-ST-ZIP	DELETE	6.1 TITLE			☐ Change	☐ Addition
TITLE	J SEECTE	6.2 NAME	• .	-		
NAME		6.3 STREET ADDRESS			• •	
STREET ADDRESS				•		
	l .	6.4 CITY-ST-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 trustee 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, with all others like empowered. CITY-ST-ZIP