


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 08, 2005 8:00 am**  
**Secretary of State**

08-15-2005 90078 026 \*\*\*150.00

DOCUMENT # <b>P97 000060955</b>	
1. Entity Name <b>Dan's Trum Striping, Inc. P9700060955</b>	

**DO NOT WRITE IN THIS SPACE**

**66027082**

2. Principal Place of Business <b>32569</b> <b>229 Michael Ave. Mary Esther Fl</b> Suite, Apt. #, etc.	3. Mailing Address <b>229 Michael Avenue</b> Suite, Apt. #, etc.
---	--

DO NOT WRITE IN THIS SPACE

City & State <b>Mary Esther Fl</b>	City & State <b>Mary Esther Fl</b>	4. FEI Number <b>59-3459958</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>32569</b>	Country <b>U.S.A</b>	Zip <b>32569</b>	Country <b>U.S.A</b>
		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name <b>William M. Sturgeon, Jr.</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>2253 Country Pl. Circle</b>	
<b>Pensacola</b>	<b>FL</b> Zip Code <b>32534</b>

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)</small>	DATE _____
<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>President</b> <b>Daniel P. Baggett</b> <b>229 Michael Ave</b> <b>Mary Esther, Fl 32569</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>Vice President - Secretary</b> <b>Rosanne Baggett Trasover</b> <b>229 Michael Avenue</b> <b>Mary Esther Fl 32569</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: <b>Rosanne Baggett - Secretary</b>	Date: <b>8-10-05</b>	Daytime Phone #: <b>850-581-6732</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>

CR2E034B (12/02)

August 09, 2005  
Dana Trem Striping, Inc.  
229 Michael Avenue  
Morgue Esther, FL 32569  
ATTACHMENT 6607082  
PG 7000060755

Florida Department of State  
Division of Corporation  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Waiver of Late Fee Due to Emergency  
Surgery due to rupture of 4 disks in Back

Dear Sir:

I am writing this letter to go along with  
my Uniform Business Report to request  
please that you waive the late filing fee.

Due to the rupture of more than four  
disks in my back I was paralyzed and required  
Emergency Surgery at Shands Hospital in Gainesville  
Fl on Feb 23, 2005 Recovery was very slow  
Most of my muscles from my breast down to the  
feet atrophied and I had to begin the slow  
process of relearning to use them. Through  
more than 3 months of Physical Therapy I  
gained my muscle control and can once  
again walk & move around. During this  
time it took all our efforts just to get through  
the process of daily living.

We were so very busy  
I never thought about filing Corporation  
papers till I received notice in the mail.

Thank You for your consideration. As  
instructed here are the papers and a check  
for \$150.00

Sincerely  
Robanne Baggett

ATTACHMENT

66027082

8-27-05

Dan's Trum Striping Inc.  
229 Michael Avenue

Mary Esther, FL 32569

Re P97000060955

Dear Sir:

I am returning the corporation application to you. I made the needed change to the name of the registered agent. Our registered agent has not changed. I put in his common name not his formal one.

I made the needed changes and am returning it to you

Thank you

Rosanne Baggett



ATTACHMENT

66027088

FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

August 18, 2005

DAN'S TRIM STRIPING, INC.  
229 MICHAEL AVENUE  
MARY ESTHER, FL 32569

Subject: DAN'S TRIM STRIPING, INC.

Reference Number:

P97000060955

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS

ANNUAL REPORTS SECTION