

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000095858

FILED
Apr 27, 2006
Secretary of State

Entity Name: THE PAINT AUTHORITY, INC.

Current Principal Place of Business:

3915 EAST DOUBLE J ACRES ROAD
ALVA, FL 33920

New Principal Place of Business:

Current Mailing Address:

3915 EAST DOUBLE J ACRES ROAD
ALVA, FL 33920

New Mailing Address:

FEI Number: 65-0792706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PTD () Delete
Name: ARNIOTIS, SHERRY
Address: 3915 EAST DOUBLE J ACRES ROAD
City-St-Zip: ALVA, FL 33920

Title: S (X) Delete
Name: PEASE, LINDA
Address: 3941 E DOUBLE J ACRES RD
City-St-Zip: ALVA, FL 33920

Title: VD (X) Delete
Name: PEASE, RONALD
Address: 3941 E DOUBLE J ACRES ROAD
City-St-Zip: ALVA, FL 33920

Title: VD () Delete
Name: ARNIOTIS, JAMES
Address: 3915 E DOUBLE J ACRES RD
City-St-Zip: ALVA, FL 33920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: SHERRY ARNIOTIS

PTD

04/27/2006

Electronic Signature of Signing Officer or Director

Date