2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000026686

Title:

Name:

Address:

City-St-Zip:

FILED Mar 22, 2004 Secretary of State

Entity Nam	ie: SPECTRUI	M COATINGS CORPORATION				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
323 VILLANOUA RD. VENICE, FL 34293				323 VILLANOVA RD. VENICE, FL 34293		
Current Mailing Address:			New Mailir	New Mailing Address:		
323 VILLAN VENICE, FL	IOUA RD. _ 34293		323 VILLAN VENICE, FI			
FEI Number:	65-0826818	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name				Address of New Registered Agent:		
5348 DREV VENICE, FL	34293 US named entity su of Florida.		pose of changing it	its registered office or registered agent, or both,		
0.0147(101(Signature of Registered Agent		Date		
Election Cam	paign Financing 1	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () C HADNAGY, MICH. 323 VILLANOVA F VENICE, FL 3429	RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () D HADNAGY, HEAT 323 VILLANOVA I VENICE, FL 3429	RD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () D GIBBS, ARLO 437 SKYLARK BL PT CHARLOTTE,		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition GIBBS, ARLO 323 VILLANOVA RD VENICE, FL 34293		
Title: Name: Address: City-St-Zip:	VP () C THOMAS, TOBY 323 VILLANOVA I VENICE, FL 3429		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition THOMAS, DYLAN 323 VILLANOVA RD VENICE, FL 34293		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL L. HADNAGY PRES 03/22/2004

() Delete

() Change (X) Addition

THORNTON, WILLIAM E III

323 VILLANOVA RD

VENICE, FL 34293