## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000043889

Entity Name: CRAFTSMAN CONCEPTS PAINTING, INC.

FILED Mar 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

37627 TRILBY ROAD 11406 FORT KING RD. DADE CITY, FL 33525 DADE CITY, FL 33523

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 343 P.O. BOX 1471

TRILBY, FL 33593 DADE CITY,, FL 33526

FEI Number: 59-3514650 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

BOYD, SUSAN H BOYD, SUSAN H 37627 TRILBY RD. 11406 FORT KING RD. DADE CITY, FL 33523 DADE CITY, FL 33525 US US

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: SUSAN H. BOYD 03/20/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CO-D ( ) Delete Title: CO-D (X) Change ( ) Addition

BOYD, SUSAN H Name: Name: BOYD, SUSAN H 37627 TRILBY RD. 11406 FORT KING RD. Address: Address: City-St-Zip: DADE CITY, FL 33523 City-St-Zip: DADE CITY, FL 33525

Title: Title: (X) Change ( ) Addition () Delete

BOYD, GREGORY C Name: Name: BOYD, GREGORY C 37627 TRILBY RD. 11406 FORT KING RD. Address: Address: DADE CITY, FL 33523 DADE CITY, FL 33525 City-St-Zip: City-St-Zip:

Title: Title: CO-D (X) Delete () Change () Addition

NUTT, JOSEPH C Name: 34945 BUCK RD Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 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: SUSAN H. BOYD CO-D 03/20/2007