## 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 # P98000053973

1. Corporation Name

BRANDON PAINTING & DECORATING, INC.

Principal Place of Business	
4800 MOLOKAI DRIVE	

## FILED Mar 23, 1999 8:00 am **Secretary of State**

03-23-1999 90047 006 \*\*\*150.00

Mailing Address 4800 MOLOKAI DRIVE NAPLES FL 34112 NAPLES FL 34112 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/15/1998 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country Country This corporation owes the current year Intangible Zip □No 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BRANDON, SUZE Street Address (P.O. Box Number is Not Acceptable) 4800 MOLOKAI DRIVE NAPLES FL 34112 83 84 85 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE ☐ Change Addition TITLE Daryl Glenn Luther BRANDON, SUZE 12 NAME NAME 3841 29 Ave 5w 4800 MOLOKAI DRIVE 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34112 1.4 CITY-ST-ZIF CITY-ST-ZIP Addition ☐ Change TITLE **VPS** □ DELETE 2.1 TITLE BRANDON, JOHN 2.2 NAME NAME 4800 MOLOKAI DRIVE 2.3 STREET ADDRESS STREET ADDRES NAPLES FL 34112 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE LYMBURNER, ROBERT NAME 3.2 NAME 2751 SANDPIPER STREET 3.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34102 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY+ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

CR2E034.(11/98)