SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



P98000073416

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 22, 1999 8:00 am Secretary of State

07-22-1999 90005 034 ***150.00

LONGS	HORE PAINTING INC.			,	* 5	593428 - 90005 - 34	8 *	
					\			1
Principal Place	e of Business	Mailing Address						
102 W. CHESTER ST. 102 W. CHESTER ST.								
CLERMONT FL	, 34711	CLERMONT FL 34711			DO NOT V	VRITE IN THIS SPA	ACE	
					3. Date Incorporated or Quali			\neg
					08/20/1998			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	-
21 26					X 283-48-5907 Not Applicable			,
Suite, Apt. #, etc. Suite, Apt. #, etc.					- 0 115 1 101 1 0 1	. 🗆 \$	8.75 Additional	
27 P.O.BOX 120754 27					5. Certificate of Status Desire		Fee Required	
City & State City & State					6. Election Campaign Financi	ng	55.00 May Be	
23 CLERMONT, PC 28					Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country	у	8. This corporation owes the	current year		
24 34"	712 25 LANE	29 30			Intangible Personal Proper	<u></u>		_
	9. Name and Address of Curren	t Registered Agent		, .	10. Name and Address of Ne	w Registered Age	nt	_
	10011005 0011110 5 00		81	Name				
LONGSHORE, RONALD E SR				Street /	ess (P.O. Box Number is Not Acc	eptable)		
102 W. CHESTER ST.						· · ·		4
CLERMONT FL 34711				3				
			84	City	<u> </u>	8	5 Zip Code	-
				, 5,	FL T			
11. Pursuant	to the provisions of sections 607.050	2 and 607.1508, Florida Statutes,	the above	-named co	ration submits this statement for th	e purpose of changi	ng its registered	
oπice or agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was autons of, section 607.0505, Florid	nonzeu bi la Statute	y ane corpo s.	on's board of directors, Thereby at	coept the appointme	ilit as registered	- 1
SIGNATURE	to the provisions of sections 607.050; registered agent, or both, in the State am familiar with, and accept the obligations of the control of	optible se.						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature rec					required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AND D	IRECTORS IN 12	Z
TITLE	0	DELETE	1.1 TITLE		CONGONDING (RE	MALLO DE	Change L Addition	'│₹
NAME:	LONGSHORE, RONALD E SR				LONGSHOWE, LOUALD & Change Addition RESS P.O. BOX 120754 ESP			
STREET ADDRESS	102 11. 01.601211 01.			T ADDRESS	CLERIMOUT, P	בורטזב	-(~754	3
CITY-ST-ZiP	CLERMONT FL 34711		1.4 CITY-S	ST-ZIP	SCOPERIOR I I P			ં
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NAME_			-					
STREET ADDRESS				TADDRESS				
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NAME				ŀ				
STREET ADDRESS				TADDRESS				- }
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TITLE		DELETE	•	}			Change Addition	' {
NAME			4.2 NAME					
STREET ADDRESS		•		TADDRESS				ł
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				\dashv
TITLE		DELETE	5.1 TITLE				Change L Addition	,
NAME			5.2 NAME	l				
STREET ADDRESS			5.3 STREE	TADDRESS				

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 Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP 6.1 TITLE

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE: X

CITY-ST-ZIP

STREET ADDRESS

TITLE

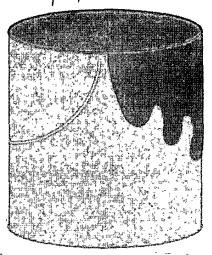
NAME

DELETE

Change Addition

593428 - 90005-34 P9800073416

LONGSHORE'S PAINTING INC.
P.O. Box 120754
Clermont, FL 34712-0754
(352) 394-2024



Division of corporation,

Please se aware my debress has change and I did not receive my first untice P. CPOX 120754

Clarmont, Se 34712-0754

Thorse your Row Son Son 7/14/99

