

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000019963**

1. Entity Name  
**CHUCK'S PAINTING & COATING INC**



Principal Place of Business  
**7628 E DERBY OAKS DR  
FLORAL CITY, FL 34436**

Mailing Address  
**7628 E DERBY OAKS DR  
FLORAL CITY, FL 34436**

**DO NOT WRITE IN THIS SPACE**



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-3563115** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**ANDRES, CHARLES E  
7628 E DERBY OAKS DR  
FLORAL CITY, FL 34436**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDRES, CHARLES E 7628 E DERBY OAKS DR FLORAL CITY, FL 34436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDRES, MARY F 7628 E DERBY OAKS DR FLORAL CITY, FL 34436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OPSAHL, TERRENCE A 9291 S. BREEN TRAIL HOMOSASSA, FL 34446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100000390336  
01/23/06-80025-007 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Mary F. Andres* - **MARY F. ANDRES** 1-16-06 352-637-0304  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #