

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # P99000042455
 1. Entity Name
MCGINNIS PAINTING, INC.



Principal Place of Business Mailing Address
 3140 N. CANAL DR. 3140 N. CANAL DR.
 PALM HARBOR, FL 34684 PALM HARBOR, FL 34684

DO NOT WRITE IN THIS SPACE



01182008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3576763	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
MCGINNIS, DENNIS K
 3140 N. CANAL DR.
 PALM HARBOR, FL 34684

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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	DPST MCGINNIS, DENNIS 3140 N. CANAL DR. PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCGINNIS, SARA I 3140 NO CANAL DRIVE PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV MCGINNIS, LEO R 206 WEST CANAL DR PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/17/08-80003-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: DENNIS K. MCGINNIS 02/26/08 727-785-8310
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #