

See Attached

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 19, 2002 8:00 am
Secretary of State

09-19-2002 90155 042 ***150.00

DOCUMENT # P99000063088

1. Entity Name
ANCHOR PAINTING CO., INC.

Principal Place of Business 951 MAPLE RIDGE COURT ORANGE PARK FL 32065	Mailing Address 951 MAPLE RIDGE COURT ORANGE PARK FL 32065
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <i>Same</i>	3. Mailing Address <i>Same</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-3643757	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required.		

6. Name and Address of Current Registered Agent

POUCHER, ALLEN L JR.
~~320 EAST ADAMS STREET~~ → **2705 Riverside Ave.**
JACKSONVILLE FL 32202 *Jax, FL. 32205*

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> Delete
NAME	DAVIS, CHERYL A	
STREET ADDRESS	951 MAPLE RIDGE COURT	
CITY-ST-ZIP	ORANGE PARK FL 32065	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date: *9/11/02* Daytime Phone #: *(904) 272-8718*

CR2E034 (9/01)

Attachments

Anchor Painting Co., Inc.

**951 Maple Ridge Court
Orange Park, Florida 32065
(904) 272-8718 Office
(904) 534-7900 Cell**

#D99000063088

"Committed to Excellence"

September 10, 2002

Dear Secretary of State,

I regret to inform you that my step dad passed away on May 22, 2002, after having been diagnosed with lung, bone and brain cancer.

Consequently, I am just now returning to work. I have enclosed the Uniform Business Report Form along with a check for \$150.00. Please accept my apology for this oversight. Thank you in advance for renewing my corporation.

Sincerely,

Cheryl A. Davis