

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S10090

FILED  
Apr 07, 2005  
Secretary of State

Entity Name: SPILLERS FRAMING AND ART GALLERY, INC.

## Current Principal Place of Business:

1045 PARK ST.  
JACKSONVILLE, FL 32204

## New Principal Place of Business:

14286 BEACH BOULEVARD  
SUITE 25  
JACKSONVILLE, FL 32250

## Current Mailing Address:

1045 PARK ST.  
JACKSONVILLE, FL 32204

## New Mailing Address:

14286 BEACH BOULEVARD  
SUITE 25  
JACKSONVILLE, FL 32250

FEI Number: 59-3037449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, CALVERT  
1045 PARK ST.  
JACKSONVILLE, FL 32204 US

## Name and Address of New Registered Agent:

SMITH, CALVERT  
14286 BEACH BOULEVARD  
SUITE 25  
JACKSONVILLE, FL 32250 US

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: CALVERT SMITH

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SMITH, CALVERT,  
Address: 1045 PARK ST.  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: SMITH, NORMA L.,  
Address: 1045 PARK ST.  
City-St-Zip: JACKSONVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SMITH, CALVERT,  
Address: 14286 BEACH BOULEVARD SUITE 25  
City-St-Zip: JACKSONVILLE, FL 32250

Title: D (X) Change ( ) Addition  
Name: SMITH, NORMA L.,  
Address: 14286 BEACH BOULEVARD SUITE 25  
City-St-Zip: JACKSONVILLE, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CALVERT SMITH

VP

04/07/2005

Electronic Signature of Signing Officer or Director

Date