FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

S24989

(3)

POTTER & SONS CUSTOM PAINTING & DECORATING, INC.

Principal Place	of Business	Mailing Address				
1252 LAKESH NAPLES FL 3		1252 LAKESHORE DRIVE NAPLES FL 33940				
					3. Date Incorporated or Qualified 01/14/1991	3a. Date of Last Report 06/14/1995
2. Principal Plai	ce of Business	2a. Mailing Address	··¬		4. FEI Number 65-0237020	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Orty & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Zip Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No.	
	9. Name and Address of Current		·		10. Name and Address of New R	egistered Agent
	5. Name and Addition of the		8	1 Name		
POTTER, DENISE F.				82 Street Address (P.O. Box Number is Not Acceptable)		
5060 3 AVE NW NAPLES FL 33999			83 Street		ress (F.O. DOX NOTICE TO NOT Proceptable	
NAPLES	LF 22888					1-1-2-0
			8-	4 Oity		FL 85 Zip Code
SIGNATURE _	OFFICERS AND		13.	part Sagnagt Processions	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
TITUE NAME STREET ADDRESS	POTTER, DOUGLAS S., JR. 5060 3 AVE NW	[] beer is	1.2 NAM			
CITY - ST - ZIP	NAPLES FL		1,4 CITY			
TITLE	M DOWNER DOWN AG A AD	DELETE	2.11/10	E		Change Addition
NAME	POTTER, DOUGLAS S., SR. 1252 LAKESHORE DRIVE		2.2 NAM			
STREET ADDRESS	NAPLES FL			EL ADDRESS +ST-ZIP		
AT 3/D		1) DELETE	3 1 TH L			Change Addition
NAME	POTTER, MICHAEL	L	3 2 NAM			
STREET ADDRESS	1316 DERBYSHIRE CT, B202		3.3 STR	EET ADDRESS		
CITY-ST-ZIP	NAPLES FL			-ST-ZIP		Change C Addition
THLE	POTTER, DENISE F.	DELETE	4 1 TITL	i		Change Addition
NAME	5060 3 AVE NW		4.2 NAN	IE EET ADDRESS		
STREET ADDRESS	NAPLES FL			r-St-Zif		
CITY-ST-ZIP TITLE		☐ DELETE	5 1 111			Change Addition
NAME			5.2 NAN	tE		
STREET ADDRESS			53S1H	FET ADDRESS		
CITY - ST - ZIP				r-\$1-ZIP		Change
1 777.5	1	□ DELETE	6 1 [1]	IF I		Change Character

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 description 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 hanged, or on an attanting at with an address 6.4 CiTY - ST - 7/P

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CR2E034 (12/95)