

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION
ANNUAL REPORT
1999

DEPARTMENT OF STATE
Katherine H.
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S45922

1. Corporation Name
William T. Decker Painting, Inc.
1919 Courtney Dr. #2
Fort Myers, FL. 33901

Principal Place of Business
1919 Courtney Dr. #2
Fort Myers, FL. 33901

Mailing Address
1919 Courtney Dr. #2
Fort Myers, FL. 33901

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99 DEC 22 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

3. Date Incorporated or Qualified

4. FEI Number
65-0263777

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
William T. Decker
1919 Courtney Dr. #2
Fort Myers, FL. 33901

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	WILLIAM T. DECKER, SR.	
STREET ADDRESS	1919 Courtney Dr. #2	
CITY-ST-ZIP	Fort Myers, FL. 33901	
TITLE	William T. Decker, Jr.	<input type="checkbox"/> DELETE
NAME	DIRECTOR	
STREET ADDRESS	1919 Courtney Dr. #2	
CITY-ST-ZIP	FORT MYERS, FL. 33901	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	WILLIAM T. DECKER JR. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	DIRECTOR
2.3 STREET ADDRESS	1919 Courtney Dr. #2
2.4 CITY-ST-ZIP	FORT MYERS, FL. 33901
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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****465.00 ****465.00

14. 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 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 receiver or 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William T. Decker 12-8-99 941-275-9795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 19, 1999

CARL GRECO
3949 EVANS AVENUE, SUITE 205
FT. MYERS, FL 33901

SUBJECT: WILLIAM T. DECKER PAINTING, INC.
Ref. Number: S45922

Pursuant to our telephone conversation of today's date, enclosed are the proper forms needed to bring the above listed corporation current and up to date with our office. Do to a clerical error on the part of this office, the above listed corporation was not properly sent an annual report for 1997 and was administratively dissolved for failing to file that annual report. Because of that, the corporation will not be charged a reinstatement fee at this time. The fee due at this time is \$465.00 which covers the 1997 filing fee (\$165.00), 1998 filing fee (\$150.00) and 1999 filing fee (\$150.00). Please send the attached annual report and check to my personal and confidential attention at the address below.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Leslie Sellers
Document Specialist

Letter Number: 099A00055677