

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48355

FILED  
Feb 09, 2006  
Secretary of State

Entity Name: BLACK'S SPRAY SERVICE, INC.

## Current Principal Place of Business:

P.O. BOX 540201  
MERRITT ISLAND, FL 329547201

## New Principal Place of Business:

P.O. BOX 540201  
MERRITT ISLAND, FL 32954

## Current Mailing Address:

P.O. BOX 540201  
MERRITT ISLAND, FL 329547201

## New Mailing Address:

P.O. BOX 540201  
MERRITT ISLAND, FL 32954

FEI Number: 65-0256699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KENNEDY, TERRY W  
2514 NEWFOUND HARBOR DRIVE  
MERRITT ISLAND, FL 32952 US

## Name and Address of New Registered Agent:

BOYER, CARLOS S  
2970 NEWFOUND HARBOR DRIVE  
MERRITT ISLAND, FL 32952 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: CARLOS S BOYER

02/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KENNEDY, TERRY W  
Address: 2514 NEWFOUND HARBOR DRIVE  
City-St-Zip: MERRITT ISLAND, FL

Title: D ( ) Delete  
Name: KENNEDY, NANCY A  
Address: 2514 NEWFOUND HARBOR DRIVE  
City-St-Zip: MERRITT ISLAND, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: BOYER, CARLOS S  
Address: 2970 NEWFOUND HARBOR DRIVE  
City-St-Zip: MERRITT ISLAND, FL

Title: O (X) Change ( ) Addition  
Name: BOYER, KATHERINE A  
Address: 2970 NEWFOUND HARBOR DRIVE  
City-St-Zip: MERRITT ISLAND, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CARLOS S BOYER

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02/09/2006

Electronic Signature of Signing Officer or Director

Date