

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V63705

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** CUSTOM COLORS POWDERCOATING, INC.

**Current Principal Place of Business:**

1930 - 21ST  
SARASOTA, FL 34234 US

**New Principal Place of Business:**

**Current Mailing Address:**

1930 - 21ST  
SARASOTA, FL 34234 US

**New Mailing Address:**

**FEI Number:** 65-0353310

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARY LYNN DESJARLAIS PA  
8075 S BENEVA RD #5  
SARASOTA, FL 34238 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KING, LYNN J.,  
Address: 7025 N SERENOA DR.  
City-St-Zip: SARASOTA, FL 34241

Title: VP ( ) Delete  
Name: PARISE, THOMAS  
Address: 4395 BRANDYWINE DRIVE  
City-St-Zip: SARASOTA, FL 34241

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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:** LYNN KING

PRES

03/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date