

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 352172

**Entity Name:** MULTI-COLOR PRINTING, INC.**Current Principal Place of Business:**1249 CUTOFF RD  
STUART, FL 34994-3437**Current Mailing Address:**1249 CUTOFF RD  
STUART, FL 34994-3437 US**FEI Number:** 59-1271895**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHMOYER, JR., JAMES B  
1249 CUTOFF RD  
STUART, FL 34994-3437 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	SCHMOYER, STEPHEN M
Address	1249 CUTOFF ROAD
City-State-Zip:	STUART FL 34994-3437

Title	S
Name	SCHMOYER, STEPHEN M
Address	1249 CUTOFF ROAD
City-State-Zip:	STUART FL 34994-3437

Title	VPD
Name	SCHMOYER, JR, JAMES B
Address	1249 CUTOFF ROAD
City-State-Zip:	STUART FL 34994-3437

Title	TD
Name	SCHMOYER, JR, JAMES B
Address	1249 CUTOFF ROAD
City-State-Zip:	STUART FL 34994-3437

*I hereby 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 all other like empowered.*

**SIGNATURE:** SCHMOYER, JR , JAMES B

VPD

05/06/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date