## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G33520

Name:

Address: City-St-Zip: TAFLINGER, IVAN E

BEVERLY HILLS, FL 34465

6870 N CAPRI LN

FILED Jan 04, 2005 Secretary of State

Entity Nar	ne: TAFLIN	IGER PAINT	ING INCORPORATI	ΞD			
Current Principal Place of Business:				New Pr	New Principal Place of Business:		
	EECHNUT L OO, FL 3264						
Current Mailing Address:				New Ma	New Mailing Address:		
	EECHNUT L DO, FL 3264						
FEI Number:	59-2290747	FEI Numb	per Applied For ( )	FEI Number Not A	Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name a	Name and Address of New Registered Agent:		
TAFLINGER, DOROTHY UNIT 33 LOT 5 BEECHNUT LOOP RIVERLAKE HERNANDO, FL 34442 US				6820 N	TAFLINGER, DOROTHY 6820 N BEECHNUT LOOP HERNANDO, FL 34442 US		
	named enti of Florida.	ty submits thi	s statement for the p	ourpose of changir	ng its regist	ered office or registered agent, or both,	
SIGNATURE:					01/04/2005		
	Elect	ronic Signatu	re of Registered Age	ent		Date	
Election Car	npaign Finand	ing Trust Fund	d Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSD TAFLINGER 6820 N. BEE HERNANDO	CHNUT LOOP		Title: Name: Address: City-St-Zi	p:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTD TAFLINGER 6820 N. BEA HERNANDO	CHNUT LOOP		Title: Name: Address: City-St-Zi	p:	( ) Change( ) Addition	
Title:	V	( ) Delete		Title:	٧	(X) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

TAFLINGER, IVAN E 6870 N CAPRI LN

HERNANDO, FL 34442

SIGNATURE: DOROTHY TAFLINGER VTD 01/04/2005