2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0400000896

Entity Name: SHAFFER DRYWALL INC.

FILED Apr 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1270 OXFORD DRIVE ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

1270 OXFORD DRIVE ENGLEWOOD, FL 34223

FEI Number: 20-0524532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHAFFER, MATT SHAFFER, MATT 6233 DRUCKER CIRCLE 1270 OXFORD DR

PORT CHARLOTTE, FL 33981 US ENGLEWOOD, FL 34223 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: MATT SHAFFER 04/22/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S () Delete Title: P,S (X) Change () Addition

 Name:
 SHAFFER, MATT
 Name:
 SHAFFER, MATT

 Address:
 6233 DRUCKER CIRCLE
 Address:
 1270 OXFORD DR

 City-St-Zip:
 PORT CHARLOTTE, FL 33981
 City-St-Zip:
 ENGLEWOOD, FL 34223

Title: VP,T () Delete Title: VP,T (X) Change () Addition Name: SHAFFER, HEATHER Name: SHAFFER, HEATHER

Name:SHAFFER, HEATHERName:SHAFFER, HEATHERAddress:6233 DRUCKER CIRCLEAddress:1270 OXFORD DR.City-St-Zip:PORT CHARLOTTE, FL 33981City-St-Zip:ENGLEWOOD, FL 34223

Title: VP () Delete Title: () Change () Addition

 Name:
 SALVADOR, RÖBERT A
 Name:

 Address:
 1130 NECTAR ROAD
 Address:

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:

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: MATT SHAFFER PRES 04/22/2006