## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** Feb 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS** DOCUMENT # 502121 L & L DRYWALL, INC. Principal Place of Business Mailing Address 451 BLUEBELL ROAD 451 BLUEBELL ROAD VENICE FL 34293 VENICE FL 34293 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/28/1976 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-1685024 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired .... Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. ☐ No 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 Name alden, Leonard L. 451 BLUEBELL ROAD 82 Street Address (P.O. Box Number is Not Acceptable) VENICE FL 33595 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PΩ DELETE Change Addition TITLE 1.3 TITLE ALDEN, LAWRENCE S. NAME 1.2 NAME 2504 FLOWER RD STREET ADDRESS 1.3 STREET ADDRESS VENICE FL CITY-ST-7IP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE VD ALDEN, LEONARD L. NAME 2.2 NAME 451 BLUEBELL ROAD STREET ADDRESS 2.3 STREET ADDRESS • **VENICE FL** CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETÉ STD Change Addition TITLE 3.1 TITLE alden, marie R. NAME 3.2 NAME 451 BLUEBELL ROAD STREET ADDRESS 3.3 STREET ADDRESS **VENICE FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETÉ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in

Maple PALders Duray

Block 12 or Block 13 if changed, or on an attachment with an address.

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