

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 508282

**FILED**  
**Apr 11, 2008**  
**Secretary of State**

**Entity Name:** W-M PLASTERING & DRYWALL, INC.

**Current Principal Place of Business:**

944 COUNTRY CLUB BLVD., SUITE 103  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

944 COUNTRY CLUB BLVD., SUITE 103  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 59-1677059      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PLAZEWSKI, DAVID W.  
1520 NE 33RD LN  
CAPE CORAL, FL 33909      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: P      ( ) Delete  
Name: PLAZEWSKI, ROBERT J.  
Address: 628 WILDWOOD PARKWAY  
City-St-Zip: CAPE CORAL, FL 33914

Title: V      ( ) Delete  
Name: PLAZEWSKI, DAVID  
Address: 1520 NE 33RD LN  
City-St-Zip: CAPE CORAL, FL 33909

Title: ST      ( ) Delete  
Name: PLAZEWSKI, MARIE  
Address: 628 WILDWOOD PARKWAY  
City-St-Zip: CAPE CORAL, FL 33904

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

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

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: DAVID PLAZEWSKI

V

04/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date