FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **606790** **(4)**

1. Corporation Name

GYPSUM CONSTRUCTION SOUTH, INC.

Principal Place of Business

5374 NORTH ELSTON
CHICAGO IL 60630

Mailing Address

5374 NORTH ELSTON
CHICAGO IL 60630

3. Date Incorporated or Qualified: **01/16/1979**

3a. Date of Last Report: **02/03/1995**

4. FEI Number: **36-3032462** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21

Suite, Apt. #, etc.
22

City & State
23

Zip 24 Country 25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip 29 Country 30

9. Name and Address of Current Registered Agent

REISMAN, STEPHEN H
1 S.E. 3RD AVENUE
SUITE 2600
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	CAVANAUGH, SEAN		1.2 NAME		
STREET ADDRESS	5374 N. ELSTON AVE.		1.3 STREET ADDRESS	4130 Losee Rd	
CITY-ST-ZIP	CHICAGO IL		1.4 CITY-ST-ZIP	North Las Vegas, NV 89030	
TITLE	VD	XX DELETE	2.1 TITLE	Vice Pres	☐ Change ☒ Addition
NAME	ZARRELLA, LARRY		2.2 NAME	David Del Zoppo	
STREET ADDRESS	5374 N. ELSTON AVE.		2.3 STREET ADDRESS	223 SW 28th ST	
CITY-ST-ZIP	CHICAGO IL		2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33315	
TITLE	AS	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DUHL, STUART		3.2 NAME		
STREET ADDRESS	401 N MICHIGAN AVE #3400		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		3.4 CITY-ST-ZIP		
TITLE	ST	☒ DELETE	4.1 TITLE	Secy/Treas	☐ Change ☒ Addition
NAME	MARRESE, FRANK L.		4.2 NAME	Demos, James T.	
STREET ADDRESS	5374 N. ELSTON AVE.		4.3 STREET ADDRESS	5374 N. Elston Ave.	
CITY-ST-ZIP	CHICAGO IL		4.4 CITY-ST-ZIP	Chicago, IL 60630	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	GOLDSTEIN, GAIL		5.2 NAME		
STREET ADDRESS	5374 N. ELSTON AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		5.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CIANGIOLA, PATRICIA E.		6.2 NAME		
STREET ADDRESS	5374 N. ELSTON AVE.		6.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James T. Demos 2/27/96 312-685-5500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number