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Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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 60630-1636



3. Date Incorporated or Qualified 01/16/1979
3a. Date of Last Report 03/26/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 36-3032462		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.				Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
						Yes No	

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 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	CAVANAUGH, SEAN	1.2 NAME	
STREET ADDRESS	4310 LOSEE ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	NORTH LAS VEGAS NV	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	
NAME	ZOPPO, DAVID DEL	2.2 NAME	
STREET ADDRESS	223 SW 8TH STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE	AS	3.1 TITLE	
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	4.1 TITLE	
NAME	DEMOS, JAMES T.	4.2 NAME	
STREET ADDRESS	5374 NORTH ELSTON AVENUE	4.3 STREET ADDRESS	
CITY - ST - ZIP	CHICAGO IL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	
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	6.1 TITLE	
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	

14. I do hereby 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 Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/97
Date

773-685-5500
Daytime Phone #

CR2E034 (9/96)