

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 APR 27 PH 1:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 643708 (1)  
1. Corporation Name  
CECIL M. CHAPMAN PLASTERING AND DRYWALL, INC.

Principal Place of Business Mailing Address  
6511 N.E. 21ST AVE. 6511 N.E. 21ST AVE.  
1006 N.E. 43 RD CT 1006 N.E. 43 RD CT  
FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/01/1979 36. Date of Last Report 04/29/1994  
4. FEI Number 59-1935923 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 26. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

CHAPMAN, CECIL M.  
6511 N E 21 AVENUE  
FT. LAUDERDALE FL

10. Name and Address of New Registered Agent

01 Name  
02 Street Address (P.O. Box Number is Not Acceptable)  
03  
04 City FL 05 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 required to permit transfer of registered agent and filing of report of no

Signature required to permit transfer of registered agent and filing of report of no

DATE

4-21-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME CHAPMAN, STEVEN, L V-CHR  
STREET ADDRESS 3701 N.W. 99TH AVE.  
CITY, ST, ZIP CORAL SPRINGS FL  
TITLE STD  
NAME CHAPMAN, PAULINE L  
STREET ADDRESS 6511 NE 21 AVE.  
CITY, ST, ZIP FT LAUDERDALE FL  
TITLE DP  
NAME CHAPMAN, CECIL M. CHRM  
STREET ADDRESS 6511 NE 21 AVE  
CITY, ST, ZIP FT LAUDERDALE FL  
TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY, ST, ZIP  
21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY, ST, ZIP  
31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY, ST, ZIP  
41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY, ST, ZIP  
51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY, ST, ZIP  
61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY, ST, ZIP

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(2)(b), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-95

Signature Press