


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2007 08:00 AM
Secretary of State

DOCUMENT # F01000004301
 1. Entity Name
 DRYWALL SUPPLY FLORIDA INC.



Principal Place of Business
 14235 42ND ST NE
 SAINT MICHAEL, MN 55376

Mailing Address
 14235 42ND ST NE
 SAINT MICHAEL, MN 55376



07102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 41-1933335

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 EDWARDS, RICK
 301 W MARY JESS RD.
 ORLANDO, FL 32809

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: RICK EDWARDS (NOTE: Registered Agent signature required when reinstating) DATE: 7/16/07

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC LAWSON, ANDREA 9157 NABER AVE NE ESTEGO, MN 55330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAWSON, GERALD 9157 NABER AVE NE OSTEGO, MN 55330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KREY, AMY 11630 LAKE TOWNE VIEW ALBERTVILLE, MN 55301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 07/24/07-80001-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rick Edwards (Signature) Rick Edwards (Printed Name)
 Date: 7/16/07 Daytime Phone #: 407-852-9033

Andrea Lawson, President