

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004347

FILED  
Jan 02, 2007  
Secretary of State

**Entity Name:** NORTHERN DEPENDABLE DRYWALL, INC.

**Current Principal Place of Business:**

7515 LOVEJOY  
BYRON, MI 48418

**New Principal Place of Business:**

**New Mailing Address:**

1001 W. MARION  
18  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

7515 LOVEJOY  
BYRON, MI 48418

**FEI Number:** 38-2772695

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOSSETT, DONNA  
1001 W. MARION, #18  
PUNTA GORDA, FL 33950 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: GOSSETT, DONNA  
Address: 7515 LOVEJOY  
City-St-Zip: BYRON, MI 48418

Title: V ( ) Delete  
Name: GOSSETT, KEVIN  
Address: 7515 LOVEJOY  
City-St-Zip: BYRON, MI 48418

Title: S ( ) Delete  
Name: GOSSETT, MAY  
Address: 1001 W. MARION, #7  
City-St-Zip: PUNTA GORDA, FL 33950

Title: T (X) Delete  
Name: GOSSETT, HAROLD  
Address: 1001 W. MARION, #7  
City-St-Zip: PUNTA GORDA, FL 33950

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

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

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

Title: S (X) Change ( ) Addition  
Name: SAMPERIO, ADAN  
Address: 1934 MARKESE  
City-St-Zip: LINCOLN PARK, MI 48146

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

I hereby certify that the information supplied with this filing does not qualify for the 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:** DONNA GOSSETT

PRES

01/02/2007

Electronic Signature of Signing Officer or Director

Date