## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000004347

Entity Name: DEPENDABLE DRYWALL, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:  New Principal Place of Business: 7515 LOVEJOY BYRON, MI 48418  Current Mailing Address:  New Mailing Address:  Name and Address of New Registered Agent:  Name and Address of New Registered Agent:  Name and Address of New Registered Agent:  New Reg						
Current Mailing Address:  New Mailing Address:  Name and Address of Current Registered Agent:  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  Name: Address:  Name: Address:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  ADD	Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1001 W. MARION 18 PUNTA GORDA, FL 33950  FEI Number: 38-2772695 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desire  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  GOSSETT, DONNA 1001 W. MARION, #18 PUNTA GORDA, FL 33950 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent Date  Electronic Signature of Registered Agent Date  FITTIE:  P ( ) Delete Title: ( ) Change ( ) Addition Name: GOSSETT, DONNA Address: 1001 W. MARION #18						
18 PUNTA GORDA, FL 33950 FEI Number: 38-2772695 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desire Name and Address of Current Registered Agent:  GOSSETT, DONNA 1001 W. MARION, #18 PUNTA GORDA, FL 33950 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent Date  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIR  Title: P ( ) Delete Title: ( ) Change ( ) Addition Name: GOSSETT, DONNA Name: Address: 1001 W. MARION #18 City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: ( ) Change ( ) Addition Name: GOSSETT, KEVIN Name: Address: 1001 W. MARION #18 City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: ( ) Change ( ) Addition Name: SAMPERIO, ADAN Address: 1934 MARKESE Address:	Current M	lailing Addres	s:	New Mailing Addre	ss:	
Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  Name: Address:	18		FO.			
GOSSETT, DONNA 1001 W. MARION, #18 PUNTA GORDA, FL 33950 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent		•		FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
1001 W. MARION, #18 PUNTA GORDA, FL 33950 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date	Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title:  P () Delete Title:  Name:  GOSSETT, DONNA Address:  1001 W. MARION #18 Address:  City-St-Zip:  Title:  V () Delete Title:  V () Delete Title:  Name:  Address:  City-St-Zip:  Title:  V () Delete Title:  Name:  Address:  City-St-Zip:  Title:  V () Delete Title:  Name:  Address:  City-St-Zip:  Title:  S () Delete Title:  Name:  Address:  City-St-Zip:  Title:  S () Delete Title:  Name:  Address:  City-St-Zip:  Title:  S () Delete Title:  Name:  Address:	1001 W. M	ÍARION, #18	50 US			
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Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: P ( ) Delete Name: GOSSETT, DONNA Address: 1001 W. MARION #18 City-St-Zip: PUNTA GORDA, FL 33950  Title: V ( ) Delete Title: V ( ) Delete Title: V ( ) Delete Title: Name: GOSSETT, KEVIN Name: Address: 1001 W. MARION #18 Address: City-St-Zip: PUNTA GORDA, FL 33950  City-St-Zip: PUNTA GORDA, FL 33950  Title: S ( ) Delete Title: V ( ) Change ( ) Addition Name: Address: Title: Name: Name: Name: Name: Name: Name: Address: 1934 MARKESE  Address: Address:	SIGNATUF	RE:				
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	Name: Address:	SAMPERIO, AD 1934 MARKESE	AN E	Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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 M. GOSSETT PRES 04/13/2009