## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State 04-23-1999 90130 014 \*\*\*150.00

DOCUMENT # G65206

1. Corporation Name

DIXIE DRYWALL OF HERNANDO, INC.

| Principal Plac                            | e of Business   | Mailing Address                                  |                                  |                         |                            |  | 41811 61611 61611 61 | 1811 41811 1881 |     |
|---|---|--|----------------------------------|-------------------------|----------------------------|--|----------------------|-----------------|-----|
| % MARK W. PRUNTY                          |   | % MARK W. PRUNTY                                 |                                  |                         |                            |  |                      |                 |     |
| 6085 COLONY CIRCLE                        |   | 6085 COLONY CIRCLE                               |                                  |                         |                            | DO NOT WOITE IN THE  | e enace              |                 |     |
| SPRING HILL FL 34607 SPRING HILL FL 34607 |   |  |                                  |                         | DO NOT WRITE IN THIS SPACE |  |                      |                 |     |
|   |   |  |                                  |                         |                            | <ol> <li>Date Incorporated or Qualified</li> <li>10/15/1983</li> </ol>                                   |                      | ŀ               | 1   |
| 9 Dain air al D                           | Hara of Dualman   | Zo Mailing Ada                                   | droce                            |                         |                            | 4. FEI Number  |                      | plied For       | 1   |
| 2. Principal Place of Business            |   | 2a. Mailing Address                              |                                  |                         |                            | 59-2328857   | <u> </u>             | t Applicable    | ł   |
| Suite, Apt. #, etc.                       |   | Suite, Apt. #, etc.                              |                                  |                         |                            | 39 2320037   | \$8.75 A             |                 | İ   |
| 22  |   | — 27   |                                  |                         |                            | 5. Certifcate of Status Desired  | Fee Re               |                 |     |
| City & State                              |   | City & State                                     |                                  |                         |                            | 6. Election Campaign Financing   | \$5.00               | May Bo          | ĺ   |
| 23  |   | 28   |                                  |                         |                            | Trust Fund Contribution  | Added to             |                 | l   |
| Zip                                       | Country   | Zip  |                                  | Country                 |                            | 8. This corporation owes the current year I  | ntangible            |                 | İ   |
| 24  | 25  | 29   | 30                               | ו                       |                            | Personal Property Tax.   |                      | □No             | İ   |
|   | 9. Name and Address of Curre  | nt Registered Agen                               |                                  |                         |                            | 10. Name and Address of New Registered   | / Agent              |                 |     |
|   |   |  |                                  | 81                      | Name                       |  |                      | 1               |     |
|   | INTY, MARK W.   |  |                                  | 82                      | Stroot Ac                  | ddress (P.O. Box Number is Not Acceptable)   |                      |                 | İ   |
|   | 5 COLONY CIRCLE   |  |                                  | "                       | Street At                  | adiess (1.0. box Homber is Hot / hoosplable)   |                      | _               |     |
| SPR                                       | ING HILL FL 34607   |  |                                  | 83                      |                            |  |                      |                 | )   |
|   |   |  |                                  | -                       | 0.4                        |  | 85 Zip C             | `oda            | 1   |
|   |   |  |                                  | 84                      | City                       | F  | _   65   Zip C       | ,oue            | İ   |
| office or r                               | registered agent, or both, in the State<br>am familiar with, and accept the oblig | e of Flonda. Such cha<br>pations of, Section 607 | ange was auth<br>7.0505, Florida | orized by<br>a Statutes | the corpora                | orporation submits this statement for the purpose of ation's board of directors. I hereby accept the app | intment as reg       | jistered        |     |
|   | Signature, typed or printed name of registered ag                                 |  | (NOTE: Re                        |                         | t signature requ           | uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A   | ND DIRECTO           | PS IN 12        | Í   |
| TITLE                                     | P OFFICERS A  | ND DIRECTORS                                     | DELETE                           | 13.                     | <del></del>                | ADDITIONS/CHANGES TO OFFICERS A  | Change               | ☐ Addition      | 1   |
| NAME                                      | PRUNTY, MARK W  |  |                                  | 1.2 NAME                |                            |  |                      | _               | ;   |
|   | ACCE COLONIA CID  |  |                                  | 1.3 STREET              | ADDDESS                    | •  |                      | ľ               | 1 3 |
| STREET ADDRESS                            | SPRING HILL FL 34607  |  |                                  | 1.4 CITY-S              | 1                          |  |                      |                 | 1 3 |
| TITLE                                     | V   | <u> — — ́ п</u>                                  | DELETE                           | 2.1 TITLE               | 1-211                      |  | [] Change            | Addition        | ?   |
| NAME                                      | PRUNTY, PAMELA M.   | ٥  |                                  | 2.2 NAME                |                            |  |                      |                 |     |
|   | AND OU ONLY OID   |  |                                  | 2.3 STREET              | ADDDESS                    |  |                      |                 |     |
| STREET ADDRESS                            | SPRING HILL FL  |  |                                  |                         |                            |  |                      |                 | ١   |
| _CITY+ST+ZIP 🚤<br>TITLE                   | T   | <del></del>                                      | DELETE                           | 2.4 CITY+S              | 1-21                       |  | Change               | Addition:       | ــا |
| NAME                                      | DOLENC, JOHN E.   | . –  | _                                | 3.2 NAME                | .                          |  |                      |                 |     |
| STREET ADDRESS                            | 0040 MADLED DD  |  |                                  | 3.3 STREET              | ADORESS                    |  |                      |                 |     |
| CITY-ST-ZIP                               | SPRING HILL FL  |  | ł                                | 3.4. CITY-S             | i                          |  |                      |                 | l   |
| TITLE                                     | O MINO TIEE TE  |  | DELETE                           | 4.1 TITLE               | ,-21                       |  | ☐ Change             | Addition        |     |
| NAME                                      |   | . –  | _                                | 4. 2 NAME               |                            |  |                      |                 |     |
| STREET ADDRESS                            |   |  |                                  | 4.3 STREET              | ADORESS I                  |  |                      |                 | l   |
|   | ł.  |  |                                  | 4.4 CITY-S              |                            |  |                      |                 | 1   |
| CITY-ST-ZIP<br>TITLE                      | <del>                                     </del>                                  |  | DELETE                           | 5.1 TITLE               |                            |  | Change               | ☐ Addition      | 1   |
| NAME                                      | -   | _  |                                  | 5.2 NAME                |                            |  |                      |                 |     |
| STREET ADDRESS                            | 1   |  |                                  | 5.3 STREET              | ADDRESS                    | •  |                      |                 |     |
| CITY-ST-ZIP                               |   |  |                                  | 5.4 CITY-S              | T-ZIP                      |  |                      |                 | Ì   |
| TITLE                                     | <u> </u>  |  | DELETE                           | 6.1 TITLE               |                            |  | Change               | ☐ Addition      |     |
| NAME                                      |   | _  |                                  | 6.2 NAME                |                            |  | -                    | l               |     |
| STREET ADDRESS                            | Į.  |  |                                  | 6.3 STREET              | ADORESS                    |  |                      | •               |     |
| CITY-ST-ZIP                               |   |  |                                  | 6.4 CITY-S              | r-ZIP                      |  |                      |                 |     |
|   |   |  |                                  |                         |                            |  |                      |                 |     |

14. I 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, with all other like empowered.

SIGNATURE: X

NATURE AND TYPED OR PRINTED NAME OF AGNING OFFICER OR DIRECT

| MARK W. PRUNTY 3/12/99

(352) - 596 - 0277

Da

,