2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G84916

Entity Name: HOLIDAY DRYWALL, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

325 MEARS BLVD 325 MEARS BLVD

P.O. BOX 1399 OLDSMAR, FL 34677 US OLDSMAR, FL 34677 US

Current Mailing Address: New Mailing Address:

325 MEARS BLVD. 325 MEARS BLVD

P.O. BOX 1399 OLDSMAR, FL 34677 US

FEI Number: 59-2382932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LUETH, ROBERT W.
325 MEARS BLVD
OLDSMAR, FL 34677
US
ALL FLORIDA FIRM, INC
813 DELTONA BLVD STE A
BOX 1380977

ILDSMAR, FL 34677 US BOX 1380977
DELTONA, FL 32725 US

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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC 01/21/2009

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

BELLAIRE, FL 33753

City-St-Zip:

OFFICERS AND DIRECTORS:

BELLAIRE, FL 33753

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 P (X) Change () Addition

 Name:
 LUETH, ROBERT,
 Name:
 LUETH, ROBERT W

 Address:
 508 ONTARIO AVE.
 Address:
 325 MEARS BLVD

City-St-Zip: CRYSTAL BEACH, FL 34681 City-St-Zip: OLSMAR, FL 34677

Title: DV () Delete Title: DV (X) Change () Addition Name: RENDE, MICHAEL, Address: 324 CARL AVE Title: DV (X) Change () Addition Address: 324 CARL AVE

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: CHRISTINA CLARK FOR ROBERT W LUETH P 01/21/2009