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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G88758

(9)

Mailing Address

C & D DRYWALL, INC.

Principal Place of Business

## FILED Mar 23 1998 8:00am Secretary of State



**% DON H. FRAZIER** % DON H. FRAZIER 2900 SE 156 PLACE ROAD 2900 SE 156 PLACE ROAD SUMMERFIELD FL 34491-5029 SUMMERFIELD FL 34491-5029 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/05/1984 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 21 59-2416069 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. JUNES 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FRAZIER, DON H Name 2900 SE 156 PLACE ROAD Street Address (P.O. Box Number is Not Acceptable) SUMMERFIELD FL 34491-5029 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TIFLE 1.1 TITLE Change Addition FRAZIER, DON H. NAME 1.2 NAME 2900 SE 156TH PLACE RD STREET ADDRESS 1.3 STREET ADDRESS SUMMERFIELD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ■ DELETE TITLE Change 2.1 Title Addition NAME ARTMAN, CLARK 2.2 NAME 1231 NW 102ND BLVD STREET ADDRESS 2.3 STREET ADDRESS WILDWOOD FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition FRAZIER, MARY NAME 32 NAME 2900 SE 156TH PL RD STREET ADDRESS 3.3 STREET ADDRESS SUMMERFIELD FL CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-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.

SIGNATURE: May a to the MAN AFLANCE - ( 21898 (20) 2000