

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
FILED**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

05 MAY - 1 11 9:37

**DOCUMENT # J30098 (4)**  
1. Corporate Name  
**AMERICAN GYPSUM DEALERS, INC.**

RECORDS SECTION  
TALLAHASSEE, FLORIDA

Principal Place of Business: **3160 S.W. 7TH STREET  
OCALA FL 32674**  
Mailing Address: **3160 S.W. 7TH STREET  
OCALA FL 32674**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/19/1986**      3a. Date of Last Report: **05/26/1994**  
4. FEI Number: **59-2713183**      Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has failed to file its annual report under S. 1901.0375 Florida Statutes:  Yes  No

2. Principal Place of Business: **21** State: Apt # etc: **22** City & State: **23** Zip: **24** County: **25**  
26. Mailing Address: **26** State: Apt # etc: **27** City & State: **28** Zip: **29** County: **30**

9. Name and Address of Current Registered Agent  
**COOPER, MICHAEL J.  
321 NW THIRD AVENUE  
OCALA FL 32670**

10. Name and Address of New Registered Agent  
81. Name: \_\_\_\_\_  
82. Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_  
83. \_\_\_\_\_  
84. City: \_\_\_\_\_ FL 85. Zip Code: \_\_\_\_\_

11. Pursuant to the provisions of Sections 607.0503 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature of Registered Agent)      \_\_\_\_\_ (Signature of Registered Agent or Registered Director)

12. OFFICERS AND DIRECTORS

CD	CRIDER, W. FRANK 149 W MICHIGAN AV E ORLANDO FL
PD	WOLFORD, RAY 500 PHILLIPS HWY JACKSONVILLE FL
V	MCGINTY, DAVID 3160 SW 7 ST OCALA FL
ST	CAMP, ROSANNE M 149 W MICHIGAN ST ORLANDO FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY & STATE	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY & STATE	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	

14. I, the undersigned, certify that the information suggested with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1919.02(3)(b), Florida Statutes. I further certify that the information submitted in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person with that I am an officer or director of the corporation or the owner or holder empowered to execute this report as required by Chapter 191, Florida Statutes, and that my name appears in the 12 or 13 of this report subject to my annual report with an address.

SIGNATURE: *Rosanne M. Camp*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95      407-599910