## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # J75222**

1. Entity Name BOATRIGHT DRYWALL, INC.

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SUMMERFIELD, FL 34420 US

US

Jul 07, 2006 08:00 AN **Secretary of State** 

**FILED** 

Principal Place of Business 16305 SE 36TH AVENUE

Mailing Address

4245 SE 110TH STREET BELLEVIEW, FL 34420



07052006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2836697 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

**BOATRIGHT, PEGGY J. 4245 SE 110TH STREET** BELLEVIEW, FL 34420

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
		Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PVP BOATRIGHT, RON 4245 SE 110TH STREET BELLEVIEW, FL 34420	CTORS			•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BOATRIGHT, PEGGY 4245 SE 110TH STREET BELLEVIEW, FL 34420				U00000558288 07/07/06-80002-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		•	`

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

7.5.06