
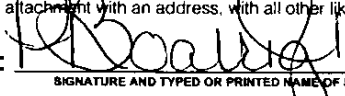


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 05, 2007 8:00 am**  
**Secretary of State**

07-05-2007 90061 050 \*\*\*150.00

<b>DOCUMENT # J75222</b>			
1. Entity Name <b>BOATRIGHT DRYWALL, INC.</b>		Principal Place of Business 16305 SE 36TH AVENUE SUMMERFIELD, FL 34420 US	
Mailing Address 4245 SE 110TH STREET BELLEVIEW, FL 34420 US		4. FEI Number <b>59-2836697</b>	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 2607</b> Suite, Apt. #, etc.	
City & State		City & State <b>Bellevue, FL</b>	
Zip	Country	Zip	Country
		<b>34421-2607</b>	<b>USA</b>
6. Name and Address of Current Registered Agent <b>BOATRIGHT, PEGGY J.</b> <b>4245 SE 110TH STREET</b> <b>BELLEVIEW, FL 34420</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>PVP</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BOATRIGHT, RON</b>	NAME	
STREET ADDRESS	<b>4245 SE 110TH STREET</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>BELLEVIEW, FL 34420</b>	CITY-ST-ZIP	
TITLE	<b>ST</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BOATRIGHT, PEGGY</b>	NAME	
STREET ADDRESS	<b>4245 SE 110TH STREET</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>BELLEVIEW, FL 34420</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: 		Date: <b>7.1.07</b> Daytime Phone #: <b>352.572.8317</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

40142901



07022007 Chg-P CR2E034 (12/06)

ATTACHMENT  
40122951  
# J75J22  
Boatright Drywall, Inc.

July 1, 2007

Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed you will find my 2007 for Profit Corporation Annual Report. When I received the card in the mail for the intent to dissolve and reminder for filing renewal, this was the first notification that I had received on this form.

I'm not sure if there was an issue with the mail being messed with at the street mailing address so I want to begin using my P.O. Box.

Thanking you in advance for your assistance in this matter.

Sincerely,

  
Peggy Boatright

PB/

P.O. Box 2607 \* Belleview, FL 34421-2607