

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L40495

1. Entity Name
RICHARDSON DRYWALL, INC.



Principal Place of Business
% GREGORY L. RICHARDSON
1075 W. GULF TO LAKE HWY
LECANTO, FL 34461 US

Mailing Address
% GREGORY L. RICHARDSON
1075 W. GULF TO LAKE HWY
LECANTO, FL 34461 US



01262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2991216

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

RICHARDSON, GREGORY L.
1075 W. GULF TO LAKE HWY
LECANTO, FL 34461

**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 reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME RICHARDSON, GREGORY L.
STREET ADDRESS 1075 W GULF TO LAKE HWY
CITY-ST-ZIP LECANTO FL

TITLE S
NAME RICHARDSON, KAY D
STREET ADDRESS 1075 W GULF TO LAKE HWY
CITY-ST-ZIP LECANTO, FL

TITLE V
NAME RICHARDSON, CHRISTOPHER L
STREET ADDRESS 1075 W GULF TO LAKE HWY
CITY-ST-ZIP LECANTO, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000203331
01/29/05-80025-015 150.00

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IN THIS SPACE**

12. 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 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: Kay D Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/05
Date

352/746-7410
Daytime Phone #