Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90079 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 504

1. Corporation	N'S WALL BOARD & CONS	TRUCTION CO., INC.			
Principal Place	of Business	Mailing Address			
2123 HILLVIEW SARASOTA FL	=	2123 HILLVIEW ST SARASOTA FL 34239		DO NOT WINT IN THE SPACE	-
US		US		DO NOT WRITE IN THIS SPACE	
				Date Incorporated or Qualifed 02/20/1990	
2. Principal Pl	ace of Business	2a. Mailing Address	1 1	4. FEI Number Applie	
21 1630	S. TAMiam. TR	26 7630. STAY	niam. Tre		pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Add	I .
22	S. 25-	27		Fee Requi	
City & State	. /. T1	City & State 28 SARASO LA	FL	6. Election Campaign Financing Trust Fund Contribution Added to F	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	,
24 3 42 3	1 25 US	29 3 42-3 30	<u>، کیں</u>	Personal Property Tax. ☐ Yes	No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	<u> </u>
JOHNSON, TERRY LEE				Idress (P.D. Box Number is Not Acceptable)	
2123 HILLVIEW ST.			82 Street Ad	A. C. Tam. am. 7k	
SARASOTA FL 34239			83	3. 11. 100	
			50		
			84 City 5	4R M/ of a FL 85 Zip Cod	* / B
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	4t - I	maration submits this statement for the number of changing its rec	istered
office or re	egistered agent, or both in the State	of Florida, Such change was auth	norized by the corpora a Statutes	orporation submits this statement in the pulpose of changing as regist attor's board of directors. I hereby accept the appointment as regist	ered
_	in farmiliar with, and accept the obligation	ions of Section Gov. Good, Florid	a Glatotos.	1/22/99	į
SIGNATURE	Standure, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature requ		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	DPT	☐ DELETE	1.1 TITLE		Addition
NAME	JOHNSON, TERRY LEE		1.2 NAME	TERPY L. JOHNSH SR	
STREET ADDRESS	2123 HILLVIEW ST		13 STREET ADDRESS	1630. 5 toniani Tr.	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	SARASOTR FL 34231	
TITLE	VP	☐ DELETÉ	2.1 TITLE	Change	Addition
NAME	BALDINI, MICHAEL		2.2 NAME	TERRY & JOHNSON JR	
STREET ADDRESS	5320 FOXRUN ROAD		2.3 STREET ADDRESS	23 Zg Livroud DR	
CITY-ST-ZIP	SARASOTA FL 32231		2.4 CITY-ST-ZIP	SARMENTA PL 34231	
TITLE		☐ DELETE	3.1 TITLE	- ·	Addition
NAME			3.2 NAME	michael Balding	ł
STREET ADDRESS			3.3 STREET ADDRESS	4083 LAKE FORIT DR	Į
CITY-ST-ZIP			3.4. CITY-ST-ZIP	SARASOFA FL 34233	
TITLE		☐ DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS		· · · · · · · · · · · · · · · · · ·	'4.3 STREET ADDRESS	ر المراجع المساحة المساحة المساحة المساحة المساحة المساحة الما المساحة الما المساحة الما المساحة الما الما الم	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	· Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
i			■ <u> </u>		

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 attactment with an address, with all other like empowered.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TED NAME OF SIGNING OFFICER OR DIRECTOR

Davtime Phone #

☐ Change

Addition