

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/9/95: \$226 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$376)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
95 JUL 21 PM 12:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L79640 (3)

1. Corporation Name
CHARLES BRANDON DRYWALL, INC.

Principal Place of Business Mailing Address
30 TEAL LANE OCALA FL 34472 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/08/1990** 3a. Date of Last Report **04/29/1994**
4. FEI Number **59-3000194** 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 liability for intangible tax under s. 195.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **195 SE 32 pl.** 26 **195 SE 32 pl**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 **Ocala FL** 28 **Ocala FL**
Zip Country 29 **34471** 30 **US**

9. Name and Address of Current Registered Agent
**BRANDON, CHARLES T., III
30 TEAK LANE
OCALA FL 34472**

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 607.0502 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 _____ DATE _____
Signature: Typed or printed name of registered agent and title if applicable. (If 301F Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	BRANDON, CHARLES T., III	1. TITLE D	Brandon, Charles T. III <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANDON, CHARLES T., III	2. NAME	Brandon Wendy K. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	30 TEAK LANE	3. STREET ADDRESS	195 SE 32 pl
CITY, ST, ZIP	OCALA FL	4. CITY, ST, ZIP	OCALA FL 34471
TITLE	D	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANDON, WENDY K.	6. NAME	
STREET ADDRESS	30 TEAK LANE	7. STREET ADDRESS	
CITY, ST, ZIP	OCALA FL	8. CITY, ST, ZIP	
TITLE		9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 attachment with an address.

SIGNATURE Charles T. Brandon III DATE 7-17-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)