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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M84400

(4)

BRENT GARROD DRYWALL, INC.

| FILED |
|--------------------|
| Feb 10 1997 8:00am |
| Secretary of State |



| Principal Place of Business 23415 JANICE AVE UNIT 26 PORT CHARLOTTE FL 33980 | Mailing Address P O BOX 2389 P. O. BOX 2389 PORT CHARLOTTE FL 33949-2389 US | | | | | | | | |
|---|--|----------------------------|----------------|------------|---|---|------------------------------------|-----------------|-----------------------------|
| US | | | | | 3. Date Incorporated or Qualified 06/02/1988 | 3a. Date of Last Report 03/06/1996 | | | |
| 2. Principal Place of Busines | 2a. Mailing Address 26 | | | | 4. FEI Number 65-0084808 | 1,456 | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | | |
| City & Stale | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | | |
| Zip Country 24 25 | | 7ip Country 29 30 | | | · · · · · · · · · · · · · · · · · · · | B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No | | | |
| 9, Name a | nd Address of Current R | | | Γ | | 10. Name and Address of New Re | | | |
| KOCH, ROBERT | ·————————————————————————————————————— | | | 81 | Name | | | | |
| 18401 MURDOCK | CIR | | | 82 | Stroot Add | dress (P.O. Box Number is Not Acceptab | do) | | |
| PORT CHARLOTT | | | " | Olicel Aut | areas (1.0, box humber is not Acceptate | ne, | | | |
| | | | | | | | | | |
| | | | | 84 | City | | FL. | 85 Zip (| Code |
| SIGNATURE | ns of Sections 607.0502 a st, or both, in the State of a sand accept the obligation pented name of registered agent as | | | | | poration submits this statement for the pation's board of directors. I hereby acception when reinstating! | ourpose of control the appointment | hanging it | ts registered registered |
| 12. | OFFICERS AND D | IRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICE | ERS AND [| DIRECTOR | RS IN 12 |
| TITLE P | | ☐ DELETE | 1.1 10 | 11.6 | | | | Change | Addition |
| NAME GARROD, B | RENT A. | | 1.2 N/ | AMF | | | | | |
| STREET ADDRESS 64 RIO CUA | | | 1.3 ST | HEE1 | ADDRESS | | | | |
| CITY-ST-ZIP PORT CHAP | ALOTTE FL | | 140 | 1Y-S | T-ZIP | | | | |
| TITLE | | ☐ DELETE | 2.1 1/ | ΙLE | | | L | _l Change | ☐ Addition |
| NAME | | | 2.2 NA | ME | | | | | |
| STREET ADDRESS | | | 2.3 \$1 | REET | ADDRESS | | | | |
| CITY-ST-ZIP | | ☐ DELETE | | | S1 - ZIP | | ··· | Change | Addition |
| TITLE | | □ Witcit | 3111 | | ļ | | L | 7 CHININGS | ☐ Modition |
| NAME Street Address | | | 3.2 NA | | ADORESS | | | | |
| | | | | | | | | | |
| CHY-ST-ZIP TITLE | | DELETE | 4.1 TI | | 31 - 7IP | | | Change | Addition |
| NAME | | Broom C. C. | 4 2 N | | ĺ | | _ | | |
| STREET ADDRESS | | | 4.3 S1 | REET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 1 | | 1-2(P | | | | Ì |
| TITLE | | DELETE | 5.1 10 | | | | | Change | Addition |
| NAME | | | 5.2 NA | ₹ME | | | | | |
| STREET ADDRESS | | | 5 3 51 | REET | AODRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CI | 1Y-\$ | 1 - ZIF | | | | |
| TITLE | | DELETE | 6.1 1/1 | TLE | | | | Change | Addition |
| NAME | | | 6.2 NA | AME | | | | | |
| STREET ADDRESS | | | 6.3 ST | REE1 | ADDRESS | | | | |
| CITY-ST-ZIP | | | 640 | | | | | |] |
| 14. I do hereby certify that I | he information supplied w | ith this filing does not q | ualify for the | exe | mption state | d in Section 119.07(3)(i), Florida Statute | s. I further c | ertify 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. BRENT CARRON DERSTORNE OF ANY