

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 24, 2001 8:00 am
Secretary of State

08-24-2001 90044 020 ***558.75

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 AV

DOCUMENT # P00000012586

1. Entity Name

W.G. DRYWALL CONSTRUCTION, INC.

Principal Place of Business

**22281 WHISTLING PINES LANE
 BOCA RATON FL 33428**

Mailing Address

**22281 WHISTLING PINES LANE
 BOCA RATON FL 33428**

2. Principal Place of Business

22589 Lanyard Street
 Suite, Apt. #, etc.

3. Mailing Address

22589 Lanyard Street
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Boca Raton FL

Zip
33428

Country
P.B.

City & State

Boca Raton FL

Zip
33428

Country
P.B.

4. FEI Number

65-0978051

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DANIEL, WILLIAM G

**22281 WHISTLING PINES LANE
 BOCA RATON FL 33428**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

22589 Lanyard Street

City

Boca Raton

FL

Zip Code

33428

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.

SIGNATURE

William G. Daniel-Rex Williams & Daniel

7/9/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **DANIEL, WILLIAM G**
 STREET ADDRESS **22281 WHISTLING PINES LANE**
 CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **VD** ☐ Delete
 NAME **MOSSIE, ANN M**
 STREET ADDRESS **22281 WHISTLING PINES LANE**
 CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANN M MOSSIE
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/01
 Date

561-483-4158
 Daytime Phone #

CR2E034 (5/01)