

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042902

Entity Name: T.R. DRYWALL AND STUCCO, INC.

FILED
May 23, 2005
Secretary of State

Current Principal Place of Business:

16205 WEST HWY 100
BUNNELL, FL 32110

New Principal Place of Business:

ONE FLORIDA PARK DRIVE SOUTH
SUITE 224
PALM COAST, FL 32137

Current Mailing Address:

16205 WEST HWY 100
BUNNELL, FL 32110

New Mailing Address:

ONE FLORIDA PARK DRIVE SOUTH
SUITE 224
PALM COAST, FL 32137

FEI Number: 59-3736559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNIS, JENNIFER
16205 WEST HWY 100
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

DENNIS, JENNIFER
3 PELICAN LANE
FLAGLER BEACH, FL 32136 US

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:

05/23/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: DENNIS, JENNIFER F
Address: 16205 WEST HWY 100
City-St-Zip: BUNNELL, FL 32110

Title: P () Delete
Name: DENNIS, CHAD
Address: 16205 W HWY 100
City-St-Zip: BUNNELL, FL 32110

Title: VP () Delete
Name: MAKI, JANNI
Address: 530 BUSINESS PARKWAY BAY 8
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: DENNIS, JENNIFER F
Address: 3 PELICAN LANE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: P (X) Change () Addition
Name: DENNIS, CHAD
Address: 3 PELICAN LANE
City-St-Zip: FLAGLER BEACH, FL 32137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHAD DENNIS

P

05/23/2005

Electronic Signature of Signing Officer or Director

Date