2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000044068

FILED Oct 02, 2006 Secretary of State

Entity Nan	na. DICHVDI	D LOWERY DRYWALL, INC.		,	
Littly Nan	HE. KICHARI	DEOWERT DRIVVALL, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	HIPPER RD. MENT, FL 325	33			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	HIPPER RD. MENT, FL 325	33			
FEI Number:	59-3714409	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
	DIANE L HIPPER RD. MENT, FL 325	33 US			
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () LOWERY, RICI 3099 E. CHIPP CANTONMENT	ER RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

Title: () Delete Title: () Change () Addition LOWERY, DIANE L Name: Name: Address: 3099 E. CHIPPER RD. Address: CANTONMENT, FL 32533 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition

Name:LUKE, JESSE EName:BULLARD, TIMOTHY JAddress:3111 E. CHIPPER RD.Address:4227 CELTIC CIRCLECity-St-Zip:CANTONMENT, FL 32533City-St-Zip:MILTON, FL 32571

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DIANE L. LOWERY V 10/02/2006