

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000104074

FILED  
Apr 24, 2002 8:00 AM  
Secretary of State

Entity Name: DRYWALL REPAIR SERVICES INC.

## Current Principal Place of Business:

2714 7TH AVE. WEST  
BRADENTON, FL 34205

## New Principal Place of Business:

## Current Mailing Address:

2714 7TH AVE. WEST  
BRADENTON, FL 34205

## New Mailing Address:

FEI Number: 80-0006804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NEWTON, CHERYL  
2714 7TH AVE. WEST  
BRADENTON, FL 34205

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILSON, JIM  
Address: 2905 9TH AVE. EAST  
City-St-Zip: BRADENTON, FL 34203

Title: VD ( ) Delete  
Name: LUNDGREN, MICHAEL J  
Address: 2714 7TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34205

Title: SD ( ) Delete  
Name: NELL, EVON  
Address: 2905 9TH AVE. EAST  
City-St-Zip: BRADENTON, FL 34203

Title: TD ( ) Delete  
Name: NEWTON, CHERYL L  
Address: 2714 7TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILSON, JIM  
Address: 2624 48TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34210

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

Title: SD (X) Change ( ) Addition  
Name: NULL, EVON  
Address: 2624 48TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34210

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: CHERYL L NEWTON

TD

04/24/2002

Electronic Signature of Signing Officer or Director

Date