2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005
Secretary of State

DOCUMENT# P01000106329

Entity Name: TOMLINSON DRYWALL INCORPORATED

Current Principal Place of Business:

2848 WINONA DR
N FT MEYERS, FL 33917

New Principal Place of Business:

2848 WINONA DR
N FT MYERS, FL 33917

Current Mailing Address:

2848 WINONA DR
N FT MEYERS, FL 33917

New Mailing Address:

2848 WINONA DR
N FT MYERS, FL 33917

FEI Number: 65-1145248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TOMLINSON, THOMAS W
2848 WINONA DR
N FT MYERS, FL 33914 US

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete
Name: TOMLINSON, THOMAS W
Address: 2848 WINONA DR
City-St-Zip: N FT MEYERS, FL 33917

Title: STD ( ) Delete
Name: TOMLINSON, DENISE A
Address: 2848 WINONA DR
City-St-Zip: N FT MEYERS, FL 33917

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition
Name: TOMLINSON, THOMAS W
Address: 2848 WINONA DR
City-St-Zip: NTH. FT. MYERS, FL 33917

Title: STD (X) Change ( ) Addition
Name: TOMLINSON, DENISE A
Address: 2848 WINONA DR
City-St-Zip: NTH. FT. MYERS, FL 33917

Title: VPR ( ) Change (X) Addition
Name: TOMLINSON, ANTHONY W
Address: 2848 WINONA DR
City-St-Zip: NTH. FT. MYERS, FL 33917

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: THOMAS W. TOMLINSON PVD 02/09/2005
Electronic Signature of Signing Officer or Director Date