

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009566

FILED  
Mar 14, 2005  
Secretary of State

Entity Name: F & M STUCCO AND DRYWALL, INC.

**Current Principal Place of Business:**

3000 ROYAL PALM AVE  
FT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

3000 ROYAL PALM AVE  
FT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 04-3591009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EDWARDS, DIAN M  
1852 40 TERR SW  
UNIT B  
NAPLES, FL 34116 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: P ( ) Delete  
Name: FLOREXIL, RENE  
Address: 3000 ROYAL PALM AVE  
City-St-Zip: FT MYERS, FL 33901

Title: VP ( ) Delete  
Name: MILCE, ELFRANCE  
Address: 14320 HAMPTON LAKE COURT  
City-St-Zip: FT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: FLOREXIL,RENE

P

03/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date