

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034044

FILED  
Apr 17, 2005  
Secretary of State

Entity Name: PERRY KABLER 'S DRYWALL SERVICE,INC

## Current Principal Place of Business:

6964 LONGMEADE LANE  
ORLANDO, FL 32822

## New Principal Place of Business:

## Current Mailing Address:

6964 LONGMEADE LANE  
ORLANDO, FL 32822

## New Mailing Address:

FEI Number: 02-0570989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KABLER, PERRY V SR  
6964 LONGMEADE LANE  
ORLANDO, FL 32822 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: DIR (X) Delete  
Name: LESTOURGEON, DORIS DIR  
Address: 12111 ARKANSAS WOODS CT  
City-St-Zip: ORLANDO, FL 32824

Title: DIR (X) Delete  
Name: ADAMSON, PATRICIA DIR  
Address: 9569 BRIMTON STREET  
City-St-Zip: ORLANDO, FL 32817

Title: DIR (X) Delete  
Name: KABLER, PERRY J DIR  
Address: 6964 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

Title: PRE ( ) Delete  
Name: KABLER, PERRY V PRESIDE  
Address: 6964 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

Title: VP ( ) Delete  
Name: KABLER, PATRICIA VP  
Address: 6964 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

Title: SEC (X) Delete  
Name: KABLER, BEVERLY SEC  
Address: 6964 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: P/SE (X) Change ( ) Addition  
Name: KABLER, PERRY V PRESIDE  
Address: 6964 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

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: PERRY V. KABLER SR.

P

04/17/2005

Electronic Signature of Signing Officer or Director

Date