

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000084801

Entity Name: P. W. DRULIAS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

405 PATRICIA AVE
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

405 PATRICIA AVE
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 06-1644051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRULIAS, WILLIAM G
1809 SPUR LANE
PALM HARBOR, FL 34685 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: PD () Delete
Name: DRULIAS, WILLIAM G
Address: 1809 SPUR LANE
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD () Delete
Name: DRULIAS, PETER V
Address: 2773 QUAIL HOLLOW RD NORTH
City-St-Zip: CLEARWATER, FL 33761

Title: T () Delete
Name: DRULIAS, KATY
Address: 2773 QUAIL HOLLOW RD NORTH
City-St-Zip: CLEARWATER, FL 33761

Title: S () Delete
Name: DRULIAS, TAMMY
Address: 1809 SPUR LANE
City-St-Zip: PALM HARBOR, FL 34685

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

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM G DRULIAS

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date