

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121531

FILED
Jul 12, 2005
Secretary of State

Entity Name: COLUMBIA DRYWALL SERVICE, INC.

Current Principal Place of Business:

LESLIE WOOD ROAD
LULU, FL 32061

New Principal Place of Business:

Current Mailing Address:

ROUTE 1, BOX 123
LULU, FL 32061

New Mailing Address:

FEI Number: 45-0519719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORRIS, JOHN E
NORRIS, KOBERLEIN & JOHNSON, P.A.
253 N.W. MAIN BOULEVARD
LAKE CITY, FL 320562349 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: HARDEN, WENDELL B
Address: ROUTE 1, BOX 123
City-St-Zip: LULU, FL 32061

Title: DS () Delete
Name: HARDEN, WESLEY
Address: RT 1 BOX 123
City-St-Zip: LUTZ, FL 32061

Title: AS () Delete
Name: STEPHENS, CHAD
Address: RT 1 BOX 123
City-St-Zip: LULU, FL 32061

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARDEN, WENDELL B
Address: 1113 SE LESLIEWOOD LN
City-St-Zip: LULU, FL 32061

Title: DS (X) Change () Addition
Name: HARDEN, WESLEY
Address: 1113 SE LESLIEWOOD LN
City-St-Zip: LUTZ, FL 32061

Title: AS (X) Change () Addition
Name: HARDEN, SUZANNE
Address: 1113 SE LESLIEWOOD LN
City-St-Zip: LULU, FL 32061

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: WENDELL HARDEN

PD

07/12/2005

Electronic Signature of Signing Officer or Director

Date