

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P03000018398**

1. Entity Name  
**ALL THINGS DRYWALL, INC.**



Principal Place of Business  
**5615 2ND AVE STOCK ISLAND  
UNIT #1  
KEY WEST, FL 33040**

Mailing Address  
**1107 KEY PLAZA  
KET WEST, FL 33040**

**FILED**  
**Jul 31, 2008 08:00 AM**  
**Secretary of State**



07222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>43-2007125</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**LUCAS, TIMOTHY  
1232 3RD ST  
KET WEST, FL 33040**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D LUCAS, TIMOTHY 2020 PATERSON AVE KET WEST, FL 33040</b>
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U000000956722  
07/31/08-80001-014 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/28/08** **305 304 4939**  
Date Daytime Phone #