

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 12, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000069332

1. Entity Name
DAYTONA DRYWALL & PLASTERING INC.



Principal Place of Business
**734 OLD SUGAR MILL RD
PORT ORANGE, FL 32129**

Mailing Address
**734 OLD SUGAR MILL RD
PORT ORANGE, FL 32129**



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0064130	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**REYNOLDS, JODY
734 OLD SUGAR MILL RD
PORT ORANGE, FL 32129**

**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 reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HIBBS, JOSEPH
STREET ADDRESS	734 OLD SUGAR MILL RD
CITY ST ZIP	PORT ORANGE, FL 32129
TITLE	V
NAME	HIBBS, JOSHUA
STREET ADDRESS	734 OLD SUGAR MILL RD
CITY ST ZIP	PORT ORANGE, FL 32129
TITLE	S
NAME	REYNOLDS, JODY
STREET ADDRESS	734 OLD SUGAR MILL RD
CITY ST ZIP	PORT ORANGE, FL 32129
TITLE	T
NAME	REYNOLDS, JUSTIN
STREET ADDRESS	734 OLD SUGAR MILL RD
CITY ST ZIP	PORT ORANGE, FL 32129
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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01/12/05-80022-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Jody Reynolds
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-05

Date

386-756-6889

Daytime Phone #