## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000105864

Name:

Address: City-St-Zip: 2081 WILSON BLVD, N.

NAPLES, FL 34120

Entity Name: K & S PLASTERING & DRYWALL, INC

**FILED** Aug 03, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 670 6TH STREET NE NAPLES, FL 34120 **Current Mailing Address: New Mailing Address:** 670 6TH STREET NE NAPLES, FL 34120 FEI Number: 20-0252385 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MATTHEW, KINSLEY 670 6TH STREET NE NAPLES, FL 34120 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MATTHEW, KINSLEY Name: Name: 670 6TH STREET NE Address: Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: Title: () Change () Addition () Delete Name: MATTHEW, STACYE R Name: 670 6TH STREET NE Address: Address: NAPLES, FL 34120 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition MATTHEW, TIMOTHY

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KINSLEY MATTHEW **PRES** 08/03/2005