2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000118792

Address:

City-St-Zip:

2937 NORTH 9TH STREET APT 4

ST AUGUSTINE, FL 32084

Entity Name: R C HOLT DRYWALL INC

FILED Jan 31, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1150 1ST STREET ST AUGUSTINE, FL 32095 **Current Mailing Address: New Mailing Address:** 1150 1ST STREET ST AUGUSTINE, FL 32095 FEI Number: 20-0321857 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: HOLT, RICHARD C 1150 IST STREET ST AUGUSTINE, FL 32095 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOLT, RICHARD C Name: Name: 1150 1ST STREET Address: Address: City-St-Zip: ST AUGUSTINE, FL 32095 City-St-Zip: Title: Title: () Delete (X) Change () Addition NEWBERRY, JAMES Name: SCARPUZZI, LOUIS J Name: 30 THOMAS ST 340 WHISPERING WOODS LAND APT 3 Address: Address: ST AUGUSTINE, FL ST AUGUSTINE, FL 32084 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition NEWBERRY, JAMES W Name: Name: 340 WHISPERING WOODS LAND APT. 3 Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32084 City-St-Zip: Title: SEC (X) Delete Title: () Change () Addition DE LOS SANTOS, FRANK A Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: RICHARD C HOLT PRES 01/31/2007