

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124340

Entity Name: QUALITY DRYWALL OF N.W. FLORIDA, INC.

FILED  
Jan 08, 2004  
Secretary of State

**Current Principal Place of Business:**

133 NICOLE LANE  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

133 NICOLE LANE  
CRESTVIEW, FL 32539

**New Mailing Address:**

FEI Number: 05-0591653      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROY, DAVID  
133 NICOLE LANE  
CRESTVIEW, FL 32539

**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:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      PRES      ( ) Change (X) Addition  
Name:      ROY, DAVID  
Address:      133 NICOLE LANE  
City-St-Zip:      CRESTVIEW, FL 32536

Title:      VP      ( ) Change (X) Addition  
Name:      AYSCUE, JASON  
Address:      133 NICOLE LANE  
City-St-Zip:      CRESTVIEW, FL 32536

Title:      SEC      ( ) Change (X) Addition  
Name:      ROY, CATHY  
Address:      133 NICOLE LANE  
City-St-Zip:      CRESTVIEW, FL 32536

I hereby certify that the information supplied with this filing does not qualify 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: DAVID ROY

PRES

01/08/2004

Electronic Signature of Signing Officer or Director

Date