2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 31, 2007 8:00 am Secretary of State

08-31-2007 90003 003 ***150.00

DOCUMENT	'#F	20000	125202
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 Entity Name BOTTONI DRYWALL, INC.



Principal Place of Business 196 GOLF CLUB LANE VENICE, FL 34293-4167 Maijog Address 103 GOLF CLUB LN VENICE, FL 34293



08282007

No Chg-P

CR2E034 (11/05)

4. FEI Number 05-0592600

4 U - -

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

LANGDON, ALLEN E PH.D. 125 FIRST AVENUE NOKOMIS, FL 34275-4242

DO NOT WRITE IN THIS SPACE

NOKOMIS, FL 34275-4242		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 of applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
1	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	Election Campaign Financ Trust Fund Contribution,	ing 🔲	\$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 DIRE	CTORS			, ,		
TITLE NAME STREET ADDRESS	DP BOTTONI, MICHAEL 185 GOLF CLUB LN						
CITY-ST-ZIP	VENICE, FL 34293 DST						
NAME	BOTTONI, LISA						
STREET ADDRESS	185 GOLF CLUB LN						
CITY-ST-ZIP	VENICE, FL 34293						
TITLE							
NAME							
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TITLE							
NAME STREET ADDRESS							
CITY-ST-ZIP							
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR