

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125202

Entity Name: BOTTONI DRYWALL, INC.

FILED  
Sep 04, 2009  
Secretary of State

**Current Principal Place of Business:**

187 GOLF CLUB LANE  
VENICE, FL 342934167

**New Principal Place of Business:**

196 GOLF CLUB LANE  
VENICE, FL 342934167

**Current Mailing Address:**

187 GOLF CLUB LANE  
VENICE, FL 342934167

**New Mailing Address:**

196 GOLF CLUB LANE  
VENICE, FL 342934167

FEI Number: 05-0592600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANGDON, ALLEN E PH.D.  
125 FIRST AVENUE  
NOKOMIS, FL 342754242 US

**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

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:**

Title: DP ( ) Delete  
Name: BOTTONI, MICHAEL  
Address: 187 GOLF CLUB LANE  
City-St-Zip: VENICE, FL 34293

Title: DST ( ) Delete  
Name: BOTTONI, LISA  
Address: 187 GOLF CLUB LANE  
City-St-Zip: VENICE, FL 34293

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

Title: DP (X) Change ( ) Addition  
Name: BOTTONI, MICHAEL  
Address: 196 GOLF CLUB LANE  
City-St-Zip: VENICE, FL 34293

Title: DST (X) Change ( ) Addition  
Name: BOTTONI, LISA  
Address: 196 GOLF CLUB LANE  
City-St-Zip: VENICE, FL 34293

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

SIGNATURE: MIGUEL BOTTONI

PRES

09/04/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date