

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000134178

1. Entity Name  
W&M QUALITY DRYWALL SVCS. INC.



Principal Place of Business  
12303 HOLLY JANE CT  
ORLANDO, FL 32824

Mailing Address  
12303 HOLLY JANE CT  
ORLANDO, FL 32824

**DO NOT WRITE IN THIS SPACE**



02122008 No Chg-P CR2E034 (11/05)

4. FEI Number  
84-1634859

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MULLER, WILLIAM E  
814 HIGHLAND AVE  
ORLANDO, FL 32803

**DO NOT WRITE  
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, type or print a name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

2-12-08

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MULLER, WILHELM A  
12303 HOLLY JANE CT  
ORLANDO, FL 32824

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MULLER, WILLIAM E  
814 HIGHLAND AVE  
ORLANDO, FL 32803

TITLE  
NAME  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000896853  
04/25/08-80029-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

Signature and typed or printed name of signing officer or director

2-12-08

321-689-6363