

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142165

FILED  
May 21, 2006  
Secretary of State

Entity Name: VARNER'S A-1 DRYWALL INC.

## Current Principal Place of Business:

10031 OAK HAVEN  
PENSACOLA, FL 32526 US

## New Principal Place of Business:

707 EDEN LN. #1  
CANTONMENT, FL 32533 US

## Current Mailing Address:

10031 OAK HAVEN  
PENSACOLA, FL 32526 US

## New Mailing Address:

707 EDEN LN. #1  
CANTONMENT, FL 32533 US

FEI Number: 30-0219544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VARNER, BLUE  
10031 OAK HAVEN  
PENSACOLA, FL 32526 US

## Name and Address of New Registered Agent:

VARNER, BLUE  
707 EDEN LN # 1  
CANTONMENT, FL 32533 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:

05/21/2006

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: P ( ) Delete  
Name: VARNER, BLUE  
Address: 10031 OAK HAVEN  
City-St-Zip: PENSACOLA, FL 32526 US

Title: VP (X) Delete  
Name: STAPLES, EDWARD R  
Address: 6331 WEST NINE MILE RD. LT.C  
City-St-Zip: PENSACOLA, FL 32526 US

Title: SEC (X) Delete  
Name: PAYNE, JOESPH  
Address: 10031 OAK HAVEN  
City-St-Zip: PENSACOLA, FL 32526

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VARNER, BLUE  
Address: 707 EDEN LN.N #1  
City-St-Zip: CANTONMENT, FL 32533 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: BLUE VARNER

P

05/21/2006

Electronic Signature of Signing Officer or Director

Date