2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2004
Secretary of State

DOCUMENT# P03000148800

Entity Name: WALLBOARD PROFESSIONALS INC

Current Principal Place of Business:

325 LARCH RD
OCALA, FL 34480

New Principal Place of Business:

Current Mailing Address:

325 LARCH RD
OCALA, FL 34480

New Mailing Address:

FEI Number: 20-0457343 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLEMAN, FRANKIE E
325 LARCH RD
OCALA, FL 34480 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: P ( ) Delete
Name: COLEMAN, FRANKIE E
Address: 325 LARCH RD
City-St-Zip: OCLAA, FL 34480

Title: VP ( ) Delete
Name: FRAZIER, WILLIAM E
Address: 17 FIR TRAIL COURSE
City-St-Zip: OCALA, FL 3472

Title: VP ( ) Delete
Name: WALLEN, WILLIAM
Address: 5307 SE 13 AVE
City-St-Zip: OCALA, FL 34479

Title: T ( ) Delete
Name: RYAN, MICHAEL
Address: 5063 SE 37 AVE
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: FRANKIE COLEMAN P 08/02/2004

Electronic Signature of Signing Officer or Director Date