2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Aug 21, 2007 8:00 am Secretary of State DOCUMENT # P04000001305 08-21-2007 90009 001 ***145.00 C & C DRYWALL & FLOORING, INC. 08-21-2007 90009 002 *****5.00 Principal Place of Business Mailing Address 9351 86TH STREET **9351 86TH STREET** 66021212 LIVE OAK, FL 32060 LIVE OAK, FL 32060 CR2E034 (11/05) 08142007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 76-0750285 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETTREY, SADIE DO NOT WRITE 14293 111TH PL MCALPIN, FL 32062 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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 14, 2007 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE NAME CHERRY, TERRY E STREET ADDRESS **9351 86TH STREET** CITY-ST-ZIP LIVE OAK, FL 32060 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 applicass, with alyother like empowered.

SIGNATURE:

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

8-15-07

Daytime Phone #

FILED