

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042552

FILED
Apr 16, 2006
Secretary of State

Entity Name: DRYWALL SUPER SERVICES, INC.

Current Principal Place of Business:

13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 322261857 US

Current Mailing Address:

13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226 US

New Mailing Address:

13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 322261857 US

FEI Number: 14-1903918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JEFFERY S
13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

SMITH, JEFFERY S
13337 YELLOW BLUFF ROAD
JACKSONVILLE, FL 322261857 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: JEFFERY S SMITH

04/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SMITH, JEFFERY S
Address: 13337 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: DVP () Delete
Name: SMITH, TIMOTHY H SR
Address: 16575 EAST FORD BROOKS ROAD
City-St-Zip: SILVER SPRINGS, FL 34488 US

Title: DS () Delete
Name: BLAIR, THOMAS A
Address: 54025 JEANNIE ROAD, P O BOX 1670
City-St-Zip: CALLAHAN, FL 320111670 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SMITH, JEFFERY S
Address: 13337 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 322261857 US

Title: DVP (X) Change () Addition
Name: SMITH, TIMOTHY H SR
Address: 16575 EAST FORT BROOKS ROAD
City-St-Zip: SILVER SPRINGS, FL 34488 US

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: JEFFERY S. SMITH

DPT

04/16/2006

Electronic Signature of Signing Officer or Director

Date