## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jan 08, 2007 8:00 am Secretary of State **DOCUMENT # P04000151643** 01-08-2007 90255 005 \*\*\*158.75 ADVANTAGE DRYWALL, INC. Principal Place of Business Mailing Address 1716 LAMADERIA 14320 INDUSTRIAL CENTER DRIVE SHELBY TOWNSHIP, MI 48315 PALM BAY, FL 32908 2. Principal Place of Business - No P.O. Box 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 Chg-P CR2E034 (12/06) 4. FEI Number Applied For City & State 20-1840656 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Brevaro Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SMITH, JEFFEREY Street Address (P.O. Box Number is Not Acceptable) 1716 LAMADERIA PALM BAY, FL. 32908 City Zip Code 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. a Registered Agent SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition Teffrey Smith 1714 LaMaderia JOHNS, WILLIAM R JR. NAME NAME STREET ADDRESS 14320 INDUSTRIAL CENTER DRIVE STREET ADDRESS Adm Bay, FL 32908 CITY-ST-ZIP SHELBY TOWNSHIP, MI 48315 CITY-ST-ZIP VΡ TITLE TITLE ☐ Change Addition NAME PRETZER JEFF NAME 14310 INDUSTRIAL DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SHELBY TOWNSHIP, MI 48315 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

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