

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000092671

Entity Name: CSN DRYWALL INC.

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6130 PANGOLA DRIVE  
FT. MYERS, FL 33905

**New Principal Place of Business:**

6240 CASTLEWOOD CIRCLE  
FT. MYERS, FL 33905

**Current Mailing Address:**

6130 PANGOLA DRIVE  
FT. MYERS, FL 33905

**New Mailing Address:**

6240 CASTLEWOOD CIRCLE  
FT. MYERS, FL 33905

FEI Number: 26-0712076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FLORES-ALMANZA, SALVADOR  
6130 PANGOLA DRIVE  
FT. MYERS, FL 33905 US

**Name and Address of New Registered Agent:**

FLORES-ALMANZA, SALVADOR  
6240 CASTLEWOOD CIRCLE  
FT. MYERS, FL 33905 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: SALVADOR FLORES-ALMANZA

03/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FLORES-ALMANZA, SALVADOR  
Address: 6240 CASTLEWOOD CIRCLE  
City-St-Zip: FT. MYERS, FL 33905

I hereby 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 all other like empowered.

SIGNATURE: SALVADORE FLORES-ALMANZA

P

03/14/2011

Electronic Signature of Signing Officer or Director

Date