2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000095590

Entity Name: ATM DRYWALL SPECIALTY INC

FILED Apr 27, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

314 WASHINGTON AVEUNE 23 HARDIE LANE

VALPARAISO, FL 32580 FORT WALTON BEACH, FL 32547

Current Mailing Address: New Mailing Address:

314 WASHINGTON AVEUNE 23 HARDIE LANE

VALPARAISO, FL 32580 FORT WALTON BEACH, FL 32547

FEI Number: 26-0781758 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOLLENBRINK, TIMOTHY A
314 WASHINGTON AVEUNE

MOLLENBRINK, TIMOTHY A
23 HARDIE LANE

VALPARAISO, FL 32580 US FORT WALTON BEACH, FL 32547 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: 04/27/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name: MOELLENBRINK, TIMOTHY A

Address: 23 HARDIE LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VP

Name: MOELLENBRINK, TIMOTHY A Address: 23 HARDIE LANE

City-St-Zip: FT WALTON BEACH, FL 32547

Title: SEC

Name: MOELLENBRINK, TIMOTHY A

Address: 23 HARDIE LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TRES

Name: MOELLENBRINK, TIMOTHY A

Address: 23 HARDIE LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

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: TIMOTHY A MOELLENBRINK PRES 04/27/2010