

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000110882

Entity Name: NORMA DRYWALL INC

**FILED**  
**Oct 07, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

4344 AUDISS ROAD  
MILTON, FL 32583 US

**New Principal Place of Business:**

**Current Mailing Address:**

4344 AUDISS ROAD  
MILTON, FL 32583 US

**New Mailing Address:**

FEI Number: 26-1218217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FANELLA, NICHOLAS R  
434 TANGLEWOOD DRIVE  
FORT WALTON BEACH, FL 32547 US

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

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: NICHOLAS FANELLA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: CASTANEDA, NORMA B  
Address: 4344 AUDISS ROAD  
City-St-Zip: MILTON, FL 32583 US

Title: VP ( ) Delete  
Name: REYES-CASTANEDA, J. JESUS  
Address: 4344 AUDISS ROAD  
City-St-Zip: MILTON, FL 32583 US

Title: VP ( ) Delete  
Name: HERNANDEZ, ALFONSO  
Address: 4344 AUDISS ROAD  
City-St-Zip: MILTON, FL 32583 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NORMA CASTENADA

PSD

10/07/2008

Electronic Signature of Signing Officer or Director

Date