

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000047174

Entity Name: EMMANUEL DRYWALL INC

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

118 AIRFORCE STREET
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

118 AIRFORCE STREET
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 26-2585318

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:

CORNIELLE, ANTIA
118 AIRFORCE STREET
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: ANTIA CORNIELLE

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CORNIELLE, ANTIA
Address: 118 AIRFORCE STREET
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: VPD () Delete
Name: ARAGO, MIGUEL A
Address: 118 AIRFORCE STREET
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S () Change (X) Addition
Name: LOPEZ, CARLOS E
Address: 305 SOMERSET DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

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: ANTIA CORNIELLE

PSD

01/16/2009

Electronic Signature of Signing Officer or Director

Date