

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000025196

FILED
Apr 27, 2004
Secretary of State

Entity Name: KELLEY'S DRYWALL OF MARION COUNTY, INC.

Current Principal Place of Business:

16140 SE 91 CT
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

16140 SE 91 CT
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 59-3174356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARTMAN, GAYLA
16140 SE 91 CT
SUMMERFIELD, FL 34491 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KELLEY, RICKEY C
Address: 4650 N.E. 175TH STREET ROAD
City-St-Zip: CITRA, FL 32113

Title: M () Delete
Name: ARTMAN, CLARK
Address: 16140 SE 91 CT
City-St-Zip: SUMMERFIELD, FL 34491

Title: S () Delete
Name: ARTMAN, GAYLA
Address: 16140 SE 91 CT
City-St-Zip: SUMMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: M (X) Change () Addition
Name: ARTMAN, CLARK D III
Address: 16140 SE 91 CT
City-St-Zip: SUMMERFIELD, FL 34491

Title: S (X) Change () Addition
Name: ARTMAN, GAYLA III
Address: 16140 SE 91 CT
City-St-Zip: SUMMERFIELD, FL 34491

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLARK D. ARTMAN III

M

04/27/2004

Electronic Signature of Signing Officer or Director

Date