

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90050 034 ***150.00

DOCUMENT # P93000027933

1. Entity Name

JANNA ACOUSTICS AND DRYWALL, INC.



Principal Place of Business

7522 NORTH 40TH STREET
TAMPA FL 33604

Mailing Address

7522 N 40TH ST
TAMPA FL 33604
US

2. Principal Place of Business

3. Mailing Address

176 Juniper Hills Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Harrodsburg, KY

Zip

Country

Zip

40330

Country

U.S.

4. FEI Number

59-3175068

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHORT, PAUL R
7522 NORTH 40TH STREET
TAMPA FL 33604

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

-10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME SHORT, DONNIE
STREET ADDRESS 6820 HIGHWAY 300
CITY-ST-ZIP STANFORD KY 40484 ☐ Delete

TITLE
NAME 176 Juniper Hills Dr. ☐ Change ☐ Addition
STREET ADDRESS Harrodsburg, KY 40330
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME SHORT, JANNA L
STREET ADDRESS 6820 HIGHWAY 300
CITY-ST-ZIP STANFORD KY 40484 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
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CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donnie Short

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/04

Date

Daytime Phone #