2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000045769

Entity Name: CLARK'S DRYWALL, INC.

FILED Jan 04, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
CHITTANT Principal Place of Blicipace	NAW Principal Place of Kilsiness:

10870 HOOF PRINT DR. 10776 LIPPIZAN DRIVE JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

10870 HOOF PRINT DR. 10776 LIPPIZAN DRIVE JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257

FEI Number: 59-3187200 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:

CLARK, JOHN A

10870 HOOF PRINT DR.

JACKSONVILLE, FL 32257 US

CLARK, JOHN A

10776 LIPPIZAN DRIVE

JACKSONVILLE, FL 32257 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: JOHN A. CLARK 01/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: CLARK, JOHN A. Name: CLARK, JOHN A.

 Name:
 CLARK, JOHN A.
 Name:
 CLARK, JOHN A.

 Address:
 10870 HOOFPRINT DR
 Address:
 10776 LIPPIZAN DRIVE

 City-St-Zip:
 JACKSONVILLE, FL
 City-St-Zip:
 JACKSONVILLE, FL
 32257

Title: VPS () Delete Title: VPS (X) Change () Addition
Name: CLARK CYNTHIA S Name: CLARK CYNTHIA S

 Name:
 CLARK, CYNTHIA S
 Name:
 CLARK, CYNTHIA S

 Address:
 10870 HOOF PRINT DR
 Address:
 10776 LIPPIZAN DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 CLARK, BRYAN D

 Address:
 Address:
 4436 GILBERT STREET

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN A. CLARK PRES 01/04/2006