

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000011475

Entity Name: JOE CHAFIN DRYWALL, INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8967 BARCO LN  
JACKSONVILLE, FL 32222

**New Principal Place of Business:**

**Current Mailing Address:**

8967 BARCO LN  
JACKSONVILLE, FL 32222

**New Mailing Address:**

FEI Number: 59-3234215

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAFIN, JACKIE  
8967 BARCO LN  
JACKSONVILLE, FL 32222 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CHAFIN, JOSEPH STEVE  
Address: 8967 BARCO LN  
City-St-Zip: JACKSONVILLE, FL

Title: PD  
Name: CHAFIN, JACKIE  
Address: 8967 BARCO LN  
City-St-Zip: JACKSONVILLE, FL 32222

Title: V  
Name: CHAFIN, JOSEPH H  
Address: 8967 BARCO LN  
City-St-Zip: JACKSONVILLE, FL 32222

I hereby 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 all other like empowered.

SIGNATURE: JACKIE CHAFIN

PD

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date