# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 13, 2007**
**Secretary of State**

DOCUMENT# P95000021571

**Entity Name:** STEBILLA DRYWALL SERVICES, INC.

**Current Principal Place of Business:**

245 W. OHIO AVENUE
UNIT B
LAKE HELEN, FL 32744

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 390311
DELTONA, FL 32739

**New Mailing Address:**

245 W. OHIO AVE
UNIT B
LAKE HELEN, FL 32744

**FEI Number: 59-3332352** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

STEBILLA, MARGARET A
2124 S. OLD MILL DRIVE
DELTONA, FL 32725 US

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

STEBILLA, MICHAEL S
245 W. OHIO AVE
UNIT B
LAKE HELEN, FL 32744 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: MICHAEL S. STEBILLA 02/13/2007
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: STEBILLA, MICHAEL S
Address: P.O. BOX 390311
City-St-Zip: DELTONA, FL 32739

Title: VP (X) Delete
Name: STEBILLA, MARGARET A
Address: PO BOX 390311
City-St-Zip: DELTONA, FL 32739

Title: SEC (X) Delete
Name: STEBILLA, MARGARET A
Address: P.O. BOX 390311
City-St-Zip: DELTONA, FL 32739

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: STEBILLA, MICHAEL S
Address: 245 W. OHIO AVE UNIT B
City-St-Zip: LAKE HELEN, FL 32744

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

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

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: MICHAEL S. STEBILLA P 02/13/2007
Electronic Signature of Signing Officer or Director Date