FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

P95000024014 (9)

PANHANDLE DRYWALL SUPPLY, INC.

Principal Flace of Business Mailing Address
508 ENTERPRISE DRIVE P.O. BOX 16503

FILED Apr 17 1997 8:00am Secretary of State



PANAMA CITY FL 32408		PANAMA CITY FL 32406-8503						
					3. Date Incorporated or Qualified 03/24/1995	1	te of La	st Report
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number		14114	Applied For
21 7732 M	CHILVEY ROAD	26		59-3303503 Not A		Not Applicable		
Suite, Apr. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State 23 PANAMA	CITY BEACH, FLORIDA	City & State		· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution			00 May Be ded to Fees
Zip 24 32408	Country 25 BAY	Zip 29	Country 30	1	8. This corporation has liability for in Florida Statutes	ntangible Yes [ler s. 199.032,
	9. Name and Address of Curren	it Registered Agent			10. Name and Address of New Re	elstered /	gent	
GAUTI	ier, Russell d		81	Name				
306 E	. COLLEGE AVE.		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
TALLA	HASSEE FL 32301							·
			83					
			84	City		F 1	85	Zip Code
		007 4500 Flecide Out to				FL	<u> </u>	
office or real	the provisions of Sections 607.050 istered agent, or both, in the State familiar with, and accept the obligi	of Florida. Such change was au	uthorized by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	of the app	ointmer	ng its registered
SIGNATURE								
12.	OFFICERS AN		Registered Age	ent signature requ	uited when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDEC	TODO IN 10
	PD OFFICERS ANI	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ENS AND	Cha	
	MCDANIEL, THOMAS F.		1.2 NAME	1				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	4034 TORINO WAY		1.3 STREET	ADDDCCC				
,	PANAMA CITY FL		1.4 City - 5	- 1				
	VD	☐ DELETE	2.1 TITLE	1-40		·	Cha	nge Addition
1	JOHNSON, RONALD A.		2.2 NAME					
	5109 HIGH POINTE DR.		2.3 STREET	ADDRESS				1
	PENSACOLA FL 32505		2.4 CITY -	ST-ZIP				
	ST	DELETE	3.1 TITLE		1.	1,1	Cha	nge Addition
NAME	MCDANIEL, CHERYLE D.		3.2 NAME					
STREET ADDRESS	4034 TORINO WAY		3.3 STREET	ADDRESS				
CHY-\$1-ZIP	PANAMA CITY FL 32405		3.4. CITY -	ST-ZIP				
TIFLE.		☐ DELETE	4.1 TITLE				Cha	nge 🔲 Addition
NAME			4 2 NAME	}				
STREET ADDRESS			4 3 STREET	ADDRESS				
CHY-\$1-70°			44 CITY - S	37 - ZIP			T-1 2.	
TIILE		☐ DELETE	5 1 TITLE				Cha	nge L Addition
NAMe			5.2 NAME	1				
STREET ADDRESS			5.3 STREE	- 1				
C-TY-ST-ZIP		DELETE	5.4 CITY-5	ST-ZIP			T Cha	one Addison
TITLE		DELETE	6.1 TITLE		•		Cha	nge 🔲 Addition
NAME			6.2 NAME					
STREET ADORESS			6.3 STREE					
CHTY+ST_ZIP			6.4 CITY-	ST-ZIP				

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an adviress.

SIGNATURE

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIVICT

4-14-97

Date

904/233-5472

Daytime Phone #