

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000080844

Entity Name: JAYCO DRYWALL, INC.

FILED
Mar 29, 2004
Secretary of State

Current Principal Place of Business:

2554 BLANDING BLVD
SUITE J
MIDDLEBURG, FL 32068

Current Mailing Address:

P O BOX 1556
MIDDLEBURG, FL 32050

New Principal Place of Business:

1027 BLANDING BLVD.
SUITE 605
MIDDLEBURG, FL 32065

New Mailing Address:

FEI Number: 59-3309372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSLEY, DONALD E
2900 CREEK ST
MIDDLEBURG, FL 32068 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: MOSLEY, DONALD E
Address: 2900 CREEK ST
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: MOSLEY, ARNOLD D
Address: 2900 CREEK ST
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: DONALD E MOSLEY

PRES

03/29/2004

Electronic Signature of Signing Officer or Director

Date