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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

1. Corporation Name R & R DRYWALL, INC.  Principal Place of Business Mailing Address 522 EDINBURGH DRIVE FT. MYERS FL 33919							
					3. Date Incorporated or Qualified 12/04/1995	3a. Date of Last F	Report
	ace of Business	2a. Mailing Address			4. FEI Number	LA	applied For
21 26 Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		65-0629964	¢0.75	lot Applicable Additional
		27			5. Certificate of Status Desired		Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		May Be
<b>23</b> Zip	Country	Zip	Country		B. This corporation has liability for		
24	25 29 9. Name and Address of Current Registered Agent					yes No dress of New Registered Agent	
THE	LAW FIRM OF LAWRENCE J SP	<u>-</u>	81	Name	10, Name and Address of New Ne	gistered Agent	
	ALMERIA AVENUE	icage of ittip	82	Street Addre	ess (P.O. Box Number is Not Acceptate	nle)	
COR	AL GABLES FL 33134			OB COLUMN	000 (1.0. 000 100 100 10 100 100 pour		
			83				
			84	City		FL 85 Zip	Code
office or r agent 1 a SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation lipids of pointed name of registered age	of Florida. Such change was at ations of, Section 607.0505, Flor	uthorized by rida Statutes	the corporati	oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	purpose of changing pt the appointment as	its registered s registered
12.	OFFICERS ANI		13.	·	ADDITIONS/CHANGES TO OFFI		
T-TLE I NAME	PSTD Raun, Eric	DELETE	11 TITLE 12 NAME			Change	Addition
STREET ADDRESS	522 EDINBURGH DRIVE		1.3 STREET ADDRESS				
City - St - ZiP			1.4 CITY - S	T-ZIP			F-1
TITLE	COATS, JEFFREY		2.1 TITLE	j		Change	Addition
NAME STREET ADDRESS	811 MYRTLE TERRACE		2.2 NAME 2.3 STREET	ADDRESS			
City-ST-ZiP	NAPLES FL 30349		2. 4 CITY - ST - ZIP				
MILE		☐ DELETE	3.1 TITLE			Change	Addition Addition
NAME Officer and output			3.2 NAME				,
STREET ADORESS CITY-ST-ZIP			3.4. CITY-S	(			
Tifut		☐ DELETE	4.1 TITLE		48°	☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY ST-ZIP		DELETE	4.4 CiTY-S	T-ZIP		Change	Addition
NAME		L-) OCCETE	5.1 TITLE 5.2 NAME			ட்ப வளிம	L. Addition
STREET ADORESS			5.3 STREET	ADDRESS			
CHY-ST-ZiF			5.4 CiTY-S	· · · · · · · · · · · · · · · · · · ·			
THE		☐ DELETE 6.1 T				Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	Į			
14. I do heret	by certify that the information sumplied	d with this filing does not qualify	6.4 CITY-S		in Section 119.07(3)(i), Florida Statute	es. I further certify the	at the
informatio Lam an o	on inclicated on this annual report or s	supplemental annual report is tri the receiver or trustee empower	ue and accu ered to exec	urate and that	my signature shall have the same legi t as required by Chapter 607, Florida 9	at effect as if made u	inder oath; that

SIGNATURE: ERIC James Raun Signature and typed on Printed NAME OF SIGNING OFFICE

**FILED** 

Apr 28 1997 8:00am

Secretary of State