

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000006920

FILED
May 10, 2007
Secretary of State

Entity Name: CORAL PLASTERING & WALL SYSTEMS, INC.

Current Principal Place of Business:

3801 SAND RD
CAPE CORAL, FL 33993

New Principal Place of Business:

1820 SW 46TH TERRACE
CAPE CORAL, FL 33914

Current Mailing Address:

3801 SAND RD
CAPE CORAL, FL 33993

New Mailing Address:

1820 SW 46TH TERRACE
CAPE CORAL, FL 33914

FEI Number: 65-0636963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSPAUGH, TONI M
3801 SAND RD
CAPE CORAL, FL 33993 US

Name and Address of New Registered Agent:

ALSPAUGH, TONI M
1820 SW 46TH TERRACE
CAPE CORAL, FL 33914 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: _____

05/10/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALSPAUGH, TONI M
Address: 3801 SAND RD
City-St-Zip: CAPE CORAL, FL 33993

Title: D () Delete
Name: ALSPAUGH, GREGORY
Address: 3801 SAND RD
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALSPAUGH, TONI M
Address: 1820 SW 46TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Change () Addition
Name: ALSPAUGH, GREGORY
Address: 1820 SW 46TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify 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: TONI M ALSPAUGH

PRES

05/10/2007

Electronic Signature of Signing Officer or Director

Date