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

PROSTT. CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000038950 (7) **DOCUMENT #** 

TALLAHASSEE DRYWALL CO.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 OCT 29 AM 10: 42



Principal Place of Business Mailing Address 9120 HICKORYNUT HILL 9120 HICKORYNUT HILL TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3383207 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes □ Ño 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BLANTON, HAL 9120 HICKORYNUT HILL 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32312 23 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE \_\_\_ Change \_\_\_ Addition BLANTON, HAL NAME 1.2 NAME 500002675465--0 R2E034 9120 HICKORYNUT HILL STREET ADDRESS 1.3 STREET ADDRESS -10/29/98--01033--001 TALLAHASSEE FL 32312 CITY-ST-ZIP 1.4 CITY-ST-ZIP \*\*\*\*150\_00 \*\*\*\*150.00 DELETE TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE L. Change TIT) E 5.1 TITLE Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 13 if changed, or on an attachment with an address.

SIGNATURE:

**戸山IRED** 

To: Fla. Dept. of State Division of Corporations

From Tallahassee Dry Wall Co.

We are filing our annual rejort

and paying our filing fee for

Jall. Drynoll Co. States as we did

not receive notification in a timely

fashion. P96000038950

Sinceroly Had Blanton Pres.

SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
ON OCT 29 AM IO: 42