## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jan 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000058184 (8) SURFSIDE DRYWALL, INC. Principal Place of Business Mailing Address 1462 SOUND REFREAT DRIVE HAVARRE FL 32566 P.O. DRAWER 5100 NAVARRE FL 32566 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 07/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 8031 Wh: te Suite, Apt. #, etc. 59-3384602 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Navarre 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FLEMING, EDWARD P 4300 BAYOU BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 12 & 13 83 PENSACOLA FL 32501 84 City 85 Zip Code FL 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 Change Addition 1.1 TITLE TITLE STRANGE, BRAD 1.2 NAME CR2E034 NAME 1462 SOUND RETREAT DR 8031 White Sands Blod. STREET ADDRESS 1,3 STREET ADDRESS NAVARRE FL. Muserc Bout 12, 37566 1.4 CITY - ST - ZIP CITY - ST - ZIP Addition DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY-ST-ZIP Change 5.1 TITLE TITI F 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 emocwered 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 address

5.4 CITY-ST-ZIP

6 3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TALE

6.2 NAME

SIGNATURE: \_

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

JB Bral Strange

DELETE

1/6/98

(850) 939-1179 0511131

Change

Addition