

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

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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000088779 (9)**

1. Corporation Name

ALLSTATE PAINTING & DRYWALL, INC.

Principal Place of Business

**113 RAVENWAY DRIVE
SEFFNER FL 33584**

Mailing Address

**113 RAVENWAY DRIVE
SEFFNER FL 33584-5753**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/25/1996		3a. Date of Last Report	
21 1201 Windsor Circle		26 1201 Windsor Circle		4. FEI Number 59-3406375		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Brandon Fla.		28 Brandon Fla.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33571		25 USA		29 33570		30 USA	
24 33571		25 USA		29 33570		30 USA	

9. Name and Address of Current Registered Agent

**PATTERSON, VERNON E JR
113 RAVENWAY DRIVE
SEFFNER FL 33584**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	P/D
NAME	PATTERSON, VERNON E JR	1.2 NAME	
STREET ADDRESS	113 RAVENWAY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEFFNER FL 33584	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	
NAME	RIO-PATTERSON, MICHELLE	2.2 NAME	
STREET ADDRESS	113 RAVENWAY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEFFNER FL 33584	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 empowered 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.

SIGNATURE:

Vernon E. Patterson Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)