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FILED
Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000098957 (9)

1. Corporation Name

U.S. WALLS & CEILINGS, INC.



Principal Place of Business

Mailing Address

~~1010 BUNNELL ROAD #1100~~
~~ALTAMONTE SPRINGS FL 32714~~

~~1010 BUNNELL ROAD #1100~~
~~ALTAMONTE SPRINGS FL 32714~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/05/1996

4. FEI Number

Applied For

59-3414795

Not Applicable

6. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 2513 INDUSTRIAL BLVD

26 2513 INDUSTRIAL BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ORLANDO, FL

28 ORLANDO, FL

Zip

Country

Zip

Country

24 32804

25 U.S.A.

29 32804

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENDER, RALPH E

1010 BUNNELL ROAD #1100

ALTAMONTE SPRINGS FL 32714

2513 INDUSTRIAL BLVD.

ORLANDO, FL 32804

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

TITLE D ☐ DELETE

NAME BENDER, RALPH E

STREET ADDRESS 1010 BUNNELL ROAD #1100

CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE D ☐ DELETE

NAME STUDSTILL, WILLIAM C

STREET ADDRESS 1010 BUNNELL ROAD #1100

CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE D ☐ DELETE

NAME HUTCHERSON, TIMOTHY L

STREET ADDRESS 1010 BUNNELL ROAD #1100

CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME BENDER, RALPH E.

1.3 STREET ADDRESS 2513 INDUSTRIAL BLVD.

1.4 CITY-ST-ZIP ORLANDO, FL 32804

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME STUDSTILL, WILLIAM C.

2.3 STREET ADDRESS 2513 INDUSTRIAL BLVD.

2.4 CITY-ST-ZIP ORLANDO, FL 32804

3.1 TITLE D ☒ Change ☐ Addition

3.2 NAME HUTCHERSON, TIMOTHY L.

3.3 STREET ADDRESS 2513 INDUSTRIAL BLVD.

3.4 CITY-ST-ZIP ORLANDO, FL 32804

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

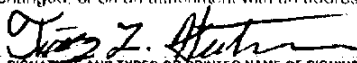
6.2 NAME

6.3 STREET ADDRESS

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), 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:



TIMOTHY L. HUTCHERSON

3/5/98 (not) 578-2210

CR2E034 (1097)