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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000070366 (4)

LENDERMAN DRYWALL INC.

## FILED Apr 13 1998 8:00am Secretary of State



Principal Plac		Mailing Address			
S580 1ST AVENUE S580 1ST AVENUE KEY WEST FL 33040 KEY WEST FL 33040				1	
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				08/13/1997	
	Place of Business	2a. Mailing Address	A	4. FEI Number	Applied For
21 5.5 80 15T AUC.		26 /125 Marchart ST		65-0770225	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		- Florida Consolina Financia	
23 Key West FL.		28 Key West	- Fl.	6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
23 / Cy	Country	710	Country	8. This corporation owes or has paid the o	
24 3304	10 25 MONTOE	33040	30 MONROE	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current			10. Name and Address of New Registere	d Agent
LENDERMAN, PATRICK 81 Name			81 Name		
5580 1ST AVENUE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
	EY WEST FL 33040		Oli oci i kadi	rous (F.O. Box Hambor to Hot Floodplasto)	
			83		
			84 City		85 Zip Code
			Ony	F	L   3   2   5   5   5   5   5   5   5   5   5
agent La SiGNATURE	am familiar with and accept the obligation of the state o	tions of, Section 607,0505, Flor values (NOTE: INCITE)	ida Statutes. Registered Agent signature requir		98
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
TITLE	PTD	☐ DELETE	1.1 TITLE		Charge T Vocition
NAME	LENDERMAN, PATRICK 5580 1ST AVENUE		1.2 NAME		
STREET ADDRESS	KEY WEST FL 33040		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	V	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	KENNEDY, MABRY	A section	2.2 NAME		
STREET ADDRESS	5580 1ST AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	KEY WEST FL 33040		2.4 CITY-ST-ZIP		
TITLE	S	DELETE	3.1 TITLE		Change Addition
NAME	BLASK, BRAD	/ \	3.2 NAME		
STREET ADDRESS	5580 1ST AVENUE		3 3 STREET ADDRESS		
CITY-ST-7IP	KEY WEST FL 33040		3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREFT ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 1ITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STHEFT ADDRESS		
CITY-ST-7IP		T priest	5 4 City-St-ZiP		Change   Addition
TITLE		DEL <b>ÉT</b> E	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
			6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, Furner certify that the information indicated on this annual report or supplemental annual roport is true 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 trusted 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.