

2001 UNIFORM BUSINESS REPORT (UBR)

2/1

FILED
Mar 14, 2001 8:00 am
Secretary of State

02-09-2001 90216 011 ***150.00

DOCUMENT # P98000014169

1. Entity Name
G. M. DRYWALL, INC.

Principal Place of Business
**48 PENNSYLVANIA AVE
OSPREY FL 34229**

Mailing Address
**48 PENNSYLVANIA AVE
OSPREY FL 34229**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0809948**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCCLURE, GILBERT
48 PENNSYLVANIA AVE
OSPREY FL 34229**

Name **Stanley A. Goldsmith, Attorney at Law**

Street Address (P.O. Box Number is Not Acceptable)
1605 Main Street, Suite 1001

City **Sarasota** **FL** Zip Code **34236**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Stanley A. Goldsmith*

Stanley A. Goldsmith, Attorney at Law DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **MCCLURE, GILBERT**
STREET ADDRESS **48 PENNSYLVANIA AVE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE **D,P,AS,AT** ☒ Change ☐ Addition
NAME **McClure, Gilbert**
STREET ADDRESS **48 Pennsylvania Ave**
CITY-ST-ZIP **Osprey, FL 34229**

TITLE **D** ☒ Delete
NAME **MCCLURE, JOYCE**
STREET ADDRESS **48 PENNSYLVANIA AVE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE **D,S,T** ☐ Change ☒ Addition
NAME **McClure, Charles T.**
STREET ADDRESS **48 Pennsylvania Ave**
CITY-ST-ZIP **Sarasota, FL 34229**

TITLE **VP** ☐ Delete
NAME **HETTICH, TED J JR**
STREET ADDRESS **3127 BROWING ST**
CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **D,VP** ☒ Change ☐ Addition
NAME **Hettich, Ted J**
STREET ADDRESS **48 Pennsylvania Ave**
CITY-ST-ZIP **Osprey, FL 34229**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gilbert McClure* **Gilbert McClure**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/01
Date

941-918-9000
Daytime Phone #

CR2E034 (10/00)