

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014169

Entity Name: G. M. DRYWALL, INC.

FILED
Jan 27, 2005
Secretary of State

Current Principal Place of Business:

48 PENNSYLVANIA AVE
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

48 PENNSYLVANIA AVE
OSPREY, FL 34229

New Mailing Address:

FEI Number: 59-0809948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSMITH, STANLEY A
1605 MAIN STREET STE 1001
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCLURE, GILBERT
Address: 48 PENNSYLVANIA AVE
City-St-Zip: OSPREY, FL 34229

Title: ASAT () Delete
Name: MCCLURE, GILBERT
Address: 48 PENNSYLVANIA AVE
City-St-Zip: OSPREY, FL 34229

Title: DST () Delete
Name: MCCLURE, CHARLES T
Address: 48 PENNSYLVANIA AVE
City-St-Zip: OSPREY, FL 34229

Title: V () Delete
Name: RUTHERFORD, JIM R
Address: 212 SOUTH REVENA
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: ROSSEN, SCOTT M
Address: 5543 PALMER BLVD
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES T MCCLURE

DST

01/27/2005

Electronic Signature of Signing Officer or Director

Date