## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000014175

Entity Name: J & M DRYWALL, INC.

Title:

Name:

Address:

City-St-Zip:

DST

FIELDS, SHAWN

3 EAST PERRY LN

ENGLEWOOD, FL 34223

( ) Delete

FILED Apr 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3572 WOODBRIDGE AVE NORTH PORT, FL 34287 **Current Mailing Address: New Mailing Address:** 3572 WOODBRIDGE AVE NORTH PORT, FL 34287 FEI Number: 65-0809966 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCLURE, GIL A 8034 TRIONFO AVE NORTH PORT, FL 34287 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition NELSON, ROBERT P JR Name: Name: 3572 WOODBRIDGE AVE Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: Title: **DVAS** Title: () Change () Addition () Delete Name: MCCLURE, JOSHUA Name: 8034 TRIONFO AVE Address: Address: NORTH PORT, FL 34287 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

DST

CANIBANO, TOM J II

NORTH PORT, FL 34287

6367 OTIS RD

SIGNATURE: ROBERT NELSON DPAT 04/07/2008

(X) Change ( ) Addition