

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000039418

Entity Name: PRECISION PLASTERING INC.

FILED  
Jul 05, 2005  
Secretary of State

## Current Principal Place of Business:

1298 SW BUILTMORE ST  
G  
PORT SAINT LUCIE, FL 34983

## New Principal Place of Business:

1909 SW S MACEDO BLVD.  
PORT SAINT LUCIE, FL 34984

## Current Mailing Address:

1298 SW BUILTMORE ST  
G  
PORT SAINT LUCIE, FL 34983

## New Mailing Address:

4922 SE POMPANO TERRACE  
STUART, FL 34997

FEI Number: 65-0849996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALTON, SHAWN  
4922 SE POMPANO TERRACE  
STUART, FL 34997 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: PSD ( ) Delete  
Name: WALTON, SHAWN  
Address: 1298 SW BILTMORE ST, STE G  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VTD ( ) Delete  
Name: WALKER, RONALD  
Address: 1298 SW BILTMORE ST  
City-St-Zip: PORT SAINT LUCIE, FL 34983

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: WALTON, SHAWN  
Address: 1909 SW S MACEDO BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: VTD (X) Change ( ) Addition  
Name: WALKER, RONALD  
Address: 1909 SW S MACEDO BLVD.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

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: SHAWN C. WALTON

PRES

07/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date