## 2003 FOR PROFIT CORPORATION

## FILED UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # P98000046003** n3 nFC 26 AH 9: 29 1. Entity Name DRY WALL SYSTEMS III. INC. SECTION OF STATE TALLAH (SSEEL HIGHDA Principal Place of Business Mailing Address 984 NORMANDY BLVD. East RF. 3-80X-120R8 KEARNEYSVILLE-WV 25430:9415. DELTONA, FL 32725 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3533821 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PENNER, ELMER E 984 NORMANDY BLVD. East Street Address (P.O. Box Number is Not Acceptable) DELTONA, FL 32725 Zip Code 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agents ignature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61,25 Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 ■ Addition CR2E034 (10/02) TITLE ☐ Delete TITLE ☐ Change PENNER, ELMER E MALIE NAME RT. 3 BOX 120R9 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KEARNEYSVILLE, WV 25430 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition 600025762<u>0</u>96 PENNER, JEAN NAME NAME 12/26/03--01014--003 STREET ADDRESS RT. 3 BOX 120R9 STREET ADDRESS \*\*后1 KEARNEYSVILLE, WV 25430 CITY-ST-2IP CITY-ST-ZIP D X Delete TITLE Change TITLE Addition KENNEDY, KIM NAMÉ NAME STREET ADDRESS 451 DEBERRY ROAD STREET ADDRESS CITY-51-2IP ENTERPRISE, FL 32725 CITY-ST-21P Delete TITLE Change Addition TITLE NAMÉ NAMÉ Mark E. Penner 984 E. Normandy Blud Deltong FL 32735 STREET ADDRESS STIRET ADDRESS CITY-ST-ZP CITY-ST-ZIP **X**Addition TITLE ☐ Delete 1016 🔲 Change

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE HAME

□ Defete

STREET ADDRESS

STREET ADDRESS

CITY-ST-262

City-st-7IP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

Justin Penner

984 E Normandy Blub

Change

Addition

EI

Kennec ElMek t. Res. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR