PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999 DOCUMENT # P9800063823

FILED
Mar 05, 1999 8:00 am
Secretary of State
Secretary of State

03-05-1999 90044 028 ***150.00

1. Corporation Name								ĺ					
ISLAND DRYWALL, INC.) (00)) 00) (10 (0)(0) (0)() 00 () 10	11 11 111 11 111 1)) 30 (12 8 1 (3 1))	11 1000 1711 (80 1	
							_						
Principal Plac	e of Business		Mailing Add	Iress				7-	1 1964 641 119 1910 1910 1940 1940		1100 1100 1100	Trans till fam. 5 .:	
P.O. BOX 1344 P.O. BOX 1344											·		
SEBASTIAN FL 32978 SEBASTIAN FL 32978								DO NOT WRITE IN THIS SPACE					_
								3.	Date Incorporated or Qualifed]
									07/15/1998				[
Principal Place of Business 2a. Mailing Address									FEI Number	-		plied For	}
21 26								L.	<u>59-35 2430</u>	<u>_ </u>		ot Applicable	}
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						_			Certificate of Status Desired	<u> </u>	• -	Additional aquired	}
City & State City & State									Election Campaign Financing			May Be	}
23 28									Trust Fund Contribution		Added	to Fees	
Zip	Country Zip			Country			8.	This corporation owes the cum	ent year inta	ingible ∐Yes	⊠No		
24					30	_		10	Personal Property Tax. Name and Address of New F	enistered /		IZII VO	┪
	9. Name and	Address of Curren	t Registered A	јегт		B1	Name	10.	Haile Blo Address of Hew				1
GRI	er, tony												-{
	3 CLEARBROOM	k street] [82 Street Addr			O. Box Number is Not Accepte	ible)			ļ
SEBASTIAN FL 32958					Į.	ВЗ			<u> </u>				1
]					L	\downarrow					[a = 1 72a	0-44	1
						84 City				FL	85 Zip	Code	
11. Pursuant	to the provisions	of Sections 607.050	2 and 607.1508,	Florida Statute	s, the abo	ove	named corpo	ratio	submits this statement for the	purpose of	changing its	registered	1
Affice or	registered agent	or both, in the State and accept the obligat	nt Finnda Such	change was all	monzea i	DV 1	ine corporation	1'S 00	and of directors. I hereby accep	it tite appoir	milein 93 ic	Arzieren	1
SIGNATURE													
	Signature, typed or prir	nted name of registered again	and this if applicable D DIRECTORS	(NOTE:	togistered A	gent	signature required		ADDITIONS/CHANGES TO OF	DATE FICERS AN	DIRECTO	RS IN 12	CR2E034 (11/98)
TILE	Empecil.		D DIRECTORS	DELETE	13. 1,1 TML	F			ADDITIONAL CITATORS TO ST	TOLINOTAL	Change	Addition] =
NAME	ANVE. GRIER				•	1.2 NAME							¥
STREET ADDRESS 1343 CLEAR BROOK ST					1.3 STREET ADDRESS								
CITY. ST. ZIP SEBASTIAN FL. 33958				1	1.4 CITY-ST-ZIP							2	
TITLE	SECRETARY DELETE				2.1 TITU	2.1 TITLE			•		Change	Addition	0
NAME	PATRICE K. GRIER				2.2 NAM	22 NAME							ļ
STREET ADDRESS	ADDRESS 1343 CLGAR BROOK ST.				2.3 STR	2.3 STREET ADDRESS							
CITY-ST-ZIP	SERDASTIAN FL. 32958				2.4 CIT	2,4 CITY-ST-ZIP					==-	51.00	1
TITLE	TREASURER DELETE				3.1 TITLE						Change	Addition	1
NAME	VALERIEY. GRIER					32 NAME			*				1
STREET ADDRESS	WALERIEY. CRIER STREET ADDRESS 1343 CLEHR BROOK ST				3.3 STREET ADDRESS							!	}
- COTV-ST-ZIP	SEBASTIAN TC. 33958				34.CITY-ST-ZIP						П Спалде	Addition	
TITLE	Trace. Ord				4.1 TITLE								İ
NAME						4.2 NAME 4.3 STREET ADDRESS			****				
STREET ADDRESS 4156 87 ST CITY-ST-ZIP YERD BEACH FL. 32967				1	4.4 CITY-ST-ZiP					– Fra	was	·	
TITLE	☐ DELETE			5.1 TITLE						Change	☐ Addition		
NAME				5.2 NAME									
STREET ADDRESS				5.3 STR	5.3 STREET ADORESS								
CITY-ST-ZP					5.4 CITY	5.4 C/TY-ST-Z/P							1
TITLÉ DELETE					6.1 TITL	6.1 TITLE					Change	Addition	
NAME				5.2 NAM	5.2 NAME)	
STREET ADDRESS	.]				6.3 STR	EET.	ADORESS.						1
CITY-ST-ZIP													1
CITY-ST-ZIP	<u> </u>				6.4 CITY				440 D7/2/6) Cloddo Statutos	4 4]

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