2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015776

Address:

City-St-Zip:

Entity Name: OGLESBY DRYWALL CORPORATION

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9145 SE 151 ST LN RD., UNIT 2 SUMMERFIELD, FL 34491 **Current Mailing Address: New Mailing Address:** 9145 SE 151 ST LN RD., UNIT 2 SUMMERFIELD, FL 34491 FEI Number: 59-3552238 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: OGLESBY, ROBERT J 10121 SW 71ST CT OCALA, FL 34470 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 () Change () Addition OGLESBY, ROBERT J Name: Name: 10000 SW 73 TERRACE Address: Address: City-St-Zip: OCALA, FL 34476 City-St-Zip: Title: Title: () Delete () Change () Addition Name: GOSSETT, JR., PIERSON D Name: 8117 SW 41ST PLACE ROAD Address: Address: OCALA, FL 34481 City-St-Zip: City-St-Zip: Title: Title: () Delete VΡ () Change (X) Addition ST. VINCENT, DAVID J Name: Name: 1716 MAGNOLIA AVE. Address Address: City-St-Zip: City-St-Zip: THE VILLAGES, FL 32159 Title: () Delete Title: VΡ () Change (X) Addition OGLESBY, MATT Name: Name:

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.

Address:

City-St-Zip:

7429 SE 115 PLACE

BELLEVIEW, FL 34420

SIGNATURE: DAVID J. ST. VINCENT VP 04/30/2004