

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90135 001 *1,100.00

0141631 AT

DOCUMENT # P99000015776

1. Entity Name

OGLESBY DRYWALL CORPORATION



Principal Place of Business

**10857 SW 91ST AVENUE
BLDG E-2
OCALA FL 34481**

Mailing Address

**10857 SW 91ST AVENUE
BLDG E-2
OCALA FL 34481**

2. Principal Place of Business

9145 SE 151st LANE RD

Suite, Apt. #, etc.

UNIT 2

City & State

SUMMERFIELD FL

Zip

34491

Country

MARION

3. Mailing Address

9145 SE 151st LANE RD

Suite, Apt. #, etc.

UNIT 2

City & State

SUMMERFIELD FL

Zip

34491

Country

MARION

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3552238

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**OGLESBY, ROBERT J
10000 SW 73 TERRACE
OCALA FL 34476**

7. Name and Address of New Registered Agent

Name

ROBERT J. OGLESBY

Street Address (P.O. Box Number is Not Acceptable)

10121 SW 71st COURT

City

OCALA

FL

Zip Code

34470

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **OGLESBY, ROBERT J**
STREET ADDRESS **10000 SW 73 TERRACE**
CITY-ST-ZIP **OCALA FL 34476**

TITLE **VP** ☒ Delete
NAME **OGLESBY, BRYANT**
STREET ADDRESS **4550 SE 120TH STREET**
CITY-ST-ZIP **BELLEVIEW FL 34420**

TITLE **VP** ☐ Delete
NAME **OGLESBY, MATT**
STREET ADDRESS **12344 SE 47TH AVENUE**
CITY-ST-ZIP **BELLEVIEW FL 34420**

TITLE **D** ☐ Delete
NAME **GOSSETT, JR., PIERSON D**
STREET ADDRESS **8117 SW 41ST PLACE ROAD**
CITY-ST-ZIP **OCALA FL 34481**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

12. 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 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.

SIGNATURE:

SIGNATURE RECEIVED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. JEFF OGLESBY

Date

Daytime Phone #

CR2E034 (4/03)