FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90434 032 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000025298

1. Entity Name
BUCKEYE DRYWALL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
14842 7th Ave East
Bradenton, Florida
Zip 34202 Country

3. Mailing Address
c/o Dreslin Financial Services
Suite, Apt. #, etc.
7985 113th Street, #220
City & State Seminole Florida
Zip 33772 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0910377 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name Dreslin Financial Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
7985 113th Street Suite 220
City Seminole FL Zip Code 33772

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January - May 1st Fee is $150.00
After May 1st Fee is $550.00
Enhanced RA Service Fee
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P	
NAME	Craig Kraft
STREET ADDRESS	14842 7th Avenue East
CITY-ST-ZIP	Bradenton, Florida 34202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 reports 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Craig Kraft 4-29-2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #