

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000071335**

1. Entity Name  
**PEAKE'S DRYWALL, INC.**

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90062 040 \*\*\*150.00

00040301



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**1061 S GLENCOE RD  
NEW SMYRNA BEACH FL 32168**

Mailing Address  
**1061 S GLENCOE RD  
NEW SMYRNA BEACH FL 32168**

2. Principal Place of Business  
**1061 S. Glencoe Rd**  
Suite, Apt. #, etc.

3. Mailing Address  
**1061 S Glencoe Rd**  
Suite, Apt. #, etc.

City & State  
**New Smyrna FL**  
Zip  
**32168**  
Country  
**Volusia**

City & State  
**New Smyrna Bch FL**  
Zip  
**32168**  
Country  
**Volusia**

4. FEI Number **57-1082813**  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**PEAKE, MAMIE E  
2534 MOBIL PARK LANE  
KISSIMMEE FL 34741**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Accepted)  
City

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$530.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PEAKE, CONLEY S</b> <b>1061 S GLENCOE RD</b> <b>NEW SMYRNA BEACH FL 32168</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PEAKE, MAMIE E</b> <b>1061 E GLENCOE RD</b> <b>NEW SMYRNA BEACH FL 32168</b>	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '01

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>PEAKE, Conley S</b> <b>1061 S. Glencoe Rd</b> <b>New Smyrna Bch FL 32168</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>PEAKE, MAMIE E</b> <b>1061 S. Glencoe Rd</b> <b>New Smyrna Bch FL 32168</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 11 or Block 12 if changed, or on an attachment with an address, with all power I am empowered.

SIGNATURE: Conley S Peake  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/01  
Date

904-426-8452  
Telephone Number

CR2E034 (10/00)

Attachments

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**MINUTES OF THE  
MAMIE PEAKE  
OF  
PEAKE'S DRYWALL INC.**

Pursuant to waiver of notice (copies of which are attached), an annual meeting of the MAMIE PEAKE of the above corporation was held on April 17, 2001 at 7:00PM at the corporation's place of business.

The purpose of the meeting: ANNUAL MEETING.

**I. QUORUM.** A quorum was declared present based on the presence of the following Directors: CONLEY AND MARIE PEAKE and the following Shareholders who were present or represented by proxy as follows:

- Shareholder: CONLEY AND MAMIE PEAKE  
Number of Shares: 100  
The Shareholder was represented in person.

The following corporate actions were taken by appropriate motions duly made, seconded, and adopted by the majority vote of the PRESIDENT entitled to vote (unless a higher voting approval is stated).

**II. REPORTS.**

- Report by MAMIE PEAKE.  
PROFIT AND LOSS OF BUSINESS.

**III. APPROVAL OF ACTIONS SECTION.** The actions and undertakings of the Directors, Officers, Employees, and Agents of the corporation were approved with respect to:

- All actions subsequent to the last meeting of the Board of Directors.
- Compensation paid to the Officers during the past year.

**IV. FINANCIAL STATEMENTS PRESENTATION.** The financial statements for the JANUARY 01, 2000 ending December 31, 2000, as prepared by the corporation's Officers, were approved. Highlights of the financial statements included: TOTAL SALES AND NET

Initials:


CSP  
MP

Attachments

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INCOME.

There being no further business, the meeting was duly adjourned.

  
MAMIE PEAKE  
Secretary