

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000071335

Entity Name: PEAKE'S DRYWALL, INC.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

1061 S GLENCOE ROAD  
NEW SMYRNA BEACH, FL 32168

## New Principal Place of Business:

5919 MANGO AVENUE  
BUNNELL, FL 32110

## Current Mailing Address:

1061 S GLENCOE ROAD  
NEW SMYRNA BEACH, FL 32168

## New Mailing Address:

5919 MANGO AVENUE  
BUNNELL, FL 32110

FEI Number: 57-1082813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEAKE, MAMIE E  
1061 S GLENCAE RD  
NEW SMYRNA BEACH, FL 32168 US

## Name and Address of New Registered Agent:

PEAKE, CONNELLY  
5919 MANGO AVENUE  
BUNNELL, FL 32110 US

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: CONNELLY PEAKE

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PEAKE, CONLEY S  
Address: 1061 S GLENCOE RD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D (X) Delete  
Name: PEAKE, MAMIE E  
Address: 1061 E GLENCOE RD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: PEAKE, CONNELLY S  
Address: 5919 MANGO AVENUE  
City-St-Zip: BUNNELL, FL 32110

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CONNELLY PEAKE

PRES

04/30/2005

Electronic Signature of Signing Officer or Director

Date