

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000094891

FILED
Jan 17, 2009
Secretary of State

Entity Name: MANIX BROTHERS DRYWALL, INC.

Current Principal Place of Business:

2647 POINCIANA DRIVE
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

2647 POINCIANA DRIVE
NAPLES, FL 34105

New Mailing Address:

FEI Number: 65-0959398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANIX, JASON
9705 SUSSEX ST.
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

MANIX, JASON A
9705 SUSSEX ST.
NAPLES, FL 34109 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: JASON A. MANIX

01/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANIX, CHAD M
Address: 2647 POINCIANA DRIVE
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: MANIX, JASON A
Address: 9705 SUSSEX ST.
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: MANIX, DAN F
Address: 2647 POINCIANA DR
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: MANIX, CHAD M
Address: 2647 POINCIANA DRIVE
City-St-Zip: NAPLES, FL 34105

Title: D,VP (X) Change () Addition
Name: MANIX, JASON A
Address: 9705 SUSSEX ST.
City-St-Zip: NAPLES, FL 34109

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JASON A. MANIX

D

01/17/2009

Electronic Signature of Signing Officer or Director

Date