FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 25 1997 8:00am

Secretary of State

Arrold Kornhaus 1/0/97 941-371-0494

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S29736

(3)

Mailing Address

PARAGON DRYWALL SERVICES, INC.

1752 APEN ROAD SUITE D SARASOTA FL 34240		1752 APEX ROAD SARASOTA FL 34240-9387 US			
US				3. Date Incorporated or Qualified 02/04/1991	3a. Date of Last Report 04/24/1996
	ace of Business	2a. Mailing Address		4. FEI Number 65-0234118	Applied For
21		26			Not Applicable
Suite, Apt #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25 9. Name and Address of Currer		30	Florida Statutes	Yes No
DATE	***************************************	u vehisteren vheur	81 Name	10. Name and Address of New Reg	Istalad Wallf
PATRICK, CARL E. 7441 NORTH TAMIAMI TRAIL SARASOTA FL 34243 81 Name Kenneth Douglass 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)					
Suite #G					
			84 City 7	1000	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent I am familiar with, and accept a toob pations of Section 607.0505, Florida Statutes.					
SIGNATURE Year of reported name of reposted agent and tribus policiable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTORS IN 12
TOLE	PD	☐ DELETE	1.1 TITLE	ADDITIONO/OF VALCE TO CITTO	Change Addition
NAME	KORNHAUS, HAROLD		1.2 NAME		
STREET ADDRESS	5272 TURTLE CREEK LANE		1.3 STREET ADDRESS		
CITY-ST-ZIF	SARASOTA FL		1.4 CITY-ST-ZIP		
TOLE	VP	DELETE	2.1 TITLE		Change Addition
NAME	JUDD, BOBBY K.		2.2 NAME		_
STREET ADDRESS	1112 ALBRITTON AVENUE		2.3 STREET ADDRESS		
CHY-SI-ZIP	SARASOTA FL		2. 4 CITY - ST - ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	KORNHAUS, KURT		3.2 NAME		
STREET ADDRESS	4535 CITATION LANE		3.3 STREET ADDRESS		
City-St-zip	SARASOTA FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
SIREEL ADDRESS			4.3 STREET ADDRESS		
CITY-ST-7IF			4.4 CITY - ST - ZIP		
Tille		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIF			5.4 CITY + ST + ZIP		
THE	***************************************	DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	•	
STREET ADORESS			6.3 STREET ADDRESS		
CHY-S1-70F			6.4 CITY - ST - ZIP		
14. I do herel	by certify that the information supplies included on the angular report of s	d with this filing does not qualify	for the exemption state	ed in Section 119.07(3)(i), Florida Statutes	. I further certify that the
information indicated on this annual report or supplemental annual 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 12 or Block 13 if chapted or on an attachment with an address.					