2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

S33919

1. Entity Name KWIK-WALL DRYWALL, INC.



FILED Feb 13, 2003 8:00 am Secretary of State

02-13-2003 90222 044 ***150.00

Principal Place of Business 6820 18TH AVENUE EAST BRADENTON FL 34208		Mailing Address 6820 18TH AVENUE EAST BRADENTON FL 34208		
2. Principal Place of Business		3. Mailing Address		} }
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 59-3049202 Applied For Not Applicable
Zip ⁴	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
•	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of New Registered Agent
	31 1 1 4 4 4 4 1 1 1 4 4 4 4 4 4 4 4 4 4		Name	The state of the s
WESTBROOK, BRUCE 6820, 18TH AVENUE EAST			Street Addres	ss (P.O. Box Number is Not Acceptable)
BRADENT	ON FL 34208			
		e.	City	FL Zip Code
	named entity submits this statement fions of registered agent.	or the purpose of changing it	s registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agen	and title if applicable. (NO	TE: Registered Agent signature requ	uired when reinstating) DATE
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of			9. Election Campaign Financing Trust Fund Contribution. S5.00 May Be Added to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WESTBROOK, BRUCE 6820 18TH AVENUE EAST BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WESTBROOK, REBECCA 6820 18TH AVENUE EAST BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP