

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUL 28 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S55982**

1. Corporation Name

Patriot Drywall Services, Inc

Principal Place of Business

Mailing Address

*203 Providence Rd
Brandon, FL 33510*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5.30.91

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 *203 Providence Rd*

25 *203 Providence Rd*

4. FEI Number

65-0268430

Applied For

Not Applicable

State, Apt. #, etc

N/A

State, Apt. #, etc

N/A

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

Brandon, FL

City & State

Brandon, FL

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

33510

Country

U.S.

Zip

33510

Country

U.S.

8. This corporation has liability for intangible tax under S 199.032,

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

John F. Anderson

82 Street Address (P.O. Box Number is Not Acceptable)

203 Providence Rd

83

84 City

Brandon, FL

85

Zip Code

33510

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 the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

John F. Anderson

7-24-95

(Signature of person or printed name of registered agent and the filer, if applicable)

(Signature of person or printed name of registered agent and the filer, if applicable)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE *President*
NAME *John F. Anderson*
STREET ADDRESS *203 Providence Rd*
CITY, ST, ZIP *Brandon, FL 33510*

14 TITLE ☐ Change ☐ Addition
15 NAME *800001551268*
16 STREET ADDRESS *-08/02/95--01002--004*
17 CITY, ST, ZIP ****225.00 ***225.00*

TITLE *V.P. Sec.*
NAME *Joanne M. Anderson*
STREET ADDRESS *203 Providence Rd*
CITY, ST, ZIP *Brandon FL 33510*

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP *N/A*

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP *N/A*

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP *N/A*

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP *N/A*

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-24-95 (813) 240-0314

(Date)

(Telephone Number)