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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S55982

(0)

PATRIOT DRYWALL SERVICES, INC.

Principal Prace of Business Mailing Address						7	: HE DING IN DING THIN FOLD: IN 18 17 17			
203 PROVIDEN BRANDON FL		203 PROVIDENCE RD. BRANDON FL 33511-4703	203 PROVIDENCE RD. BRANDON FL 33511-4707							
							Date Incorporated or Qualified 05/30/1991		te of Last R 21/1996	eport
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address			4.	FEI Number		Ar	plied For
21	**************************************	26	<u> </u>				65-0268430			ot Applicable
Suite, Apt.		Suite, Apt. #, etc.	7				Certificate of Status Desired		\$8.75 / Fee Re	
City & State	e	City & State	City & State			6.	Election Campaign Financing	-	\$5.00	May Be
23	Y	28]	T - 2			↓	Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip	····-			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				. 199.032,
24	25 9. Name and Address of Currer	29	30	•		40	Florida Statutes			
ANIF	,,,,,,,,,,,_	it riogistered Agent		81	Name		Hallo and Address of New Ne	Aieraian i	-Mour	
ANDERSON, JOHN			Ł							
203 PROVIDENCE RD. BRANDON FL 33510				82	Street Addr	ess (F	P.O. Box Number is Not Acceptab	ile)		
ייום	MDON FL 335 IU		83					 		
				84	City			FL	85 Zip (Code
office or r	to the provisions of Sections 607 050 egistered agent, or both, in the State m familiar with, and account the other.	of Florida Such change was ations of, Section 607.0505. F	authorized	ntes	the corporati	oratio ion's I	poard of directors. I hereby accep	of the app	changing it ointment as	s registered registered
	5 grade hyped or period name of required agr	est and tile sappocable (NO	TE Registered		nl signature require			DATE		
12.	OFFICERS AN		13.				ADDITIONS/CHANGES TO OFFIC		*****	
TITLE	•		1	11 TITLE					Change	Addition
NAME	ANDERSON, JOHN			1.2 NAME						
STREET ADDRESS	203 PROVIDENCE RD.		13 \$1	1 3 STREET ADDRESS						
CITY - ST - ZIP	BRANDON FL 33510	D DELETE		1.4 CiTY-ST-ZiP						
THILE	VPS	☐ DELETE		21 TITLE					Change	
NAME	ANDERSON, JOANNE		2 2 NA							
STREET ADDRESS	203 PROVIDENCE RD.				ADDRESS					
CITY-ST-ZIP TITLE	BRANDON FL 33510	DELETE	2 4 01		T-ZIP				Chapas	☐ Addition
NAME			3.1 TITLE 3.2 NAME						☐ Change	L Addition
STREET ADDRESS			1	3 3 STREET ADDRESS						
CITY-SI-ZIP			3 4. CI							
TITLE		DELETE	4170		1 · £1r	••••			Change	Addition
NAME			4 2 NA						L ovange	
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP	4 4 CI									
TITLE	DELETE 5.1 TI							Change	Addition	
NAME			5.2 NA						<u> </u>	
STREET ADDRESS			E		ADDRESS					
CITY-ST-ZIP			5.4 CIT							
TITLE		☐ DELETE	6.1 T/1						Change	Addition
NAME			6.2 NA	ME						
STREET ADDRESS 6.3			6.3 \$1	REET /	ADDRESS					
										1

14. I do hereby certify that the information supplied will this filling does not qualify for the exemption stated 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 changed, or on an attachment with an address.

SIGNATURE:

John F. Andrson

813 677 6120

FILED

Jan 14 1997 8:00am

Secretary of State