## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V06831

Entity Name: S.A.M. DRYWALL INC.

FILED Jan 09, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

Current Mailing Address: New Mailing Address:

FEI Number: 65-0308476 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEGAULT, YVES

15800 BROTHERS DR #3

FORT MYERS, FL 33912

PITKIN, JERALD R ESQ.

801 ANCHOR RODE DRIVE

SUITE 203

NAPLES, FL 34103

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: JERALD R. PITKIN, ESQ. 01/09/2003

Electronic Signature of Registered Agent Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 PT
 ( ) Delete

 Name:
 LEGAULT, YVES

 Address:
 3364-11TH AVE SW

 City-St-Zip:
 NAPLES, FL 34117

 Title:
 VPS
 ( ) Delete

 Name:
 BURNES, LARRY

 Address:
 18246 SYCAMORE RD

 City-St-Zip:
 FORT MYERS, FL

Title: ( ) Delete

Name: Address: City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition

Name: LEGAULT, YVES Address: 3364-11TH AVE SW City-St-Zip: NAPLES, FL 34117

Title: PST (X) Change ( ) Addition

 Name:
 BURNES, LARRY

 Address:
 18246 SYCAMORE RD

 City-St-Zip:
 FORT MYERS, FL 339123179

Title: D ( ) Change (X) Addition

Name: BURNES, LARRY
Address: 18246 SYCAMORE RD
City-St-Zip: FORT MYERS, FL 339123179

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LARRY BURNES P 01/09/2003