

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

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90208 036 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

2001

DOCUMENT # 297441

1. Corporation Name
 NORMAN INDUSTRIES, INC.



Principal Place of Business
 1318 10TH ST.
 SARASOTA FL 34236

Mailing Address
 6407 26TH ST W
 BRADENTON FL 34207
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24 25

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 30

3. Date Incorporated or Qualified
 10/06/1965

4. FEI Number
 59-1117253

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
 NORMAN, FRANK G
 6407 26TH ST W
 BRADENTON FL 34207-5167

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code
 FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	ROGERS, WILLIAM ELBERT	
STREET ADDRESS	2424 CLEVELAND HTS BLVD	
CITY-ST-ZIP	LAKELAND, FLORIDA 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NORMAN, FRANK G	
STREET ADDRESS	6407 26TH ST W	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	NORMAN, SARAH M	
STREET ADDRESS	6407 26TH ST W	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NORMAN, CARISSA M.	
STREET ADDRESS	6407 26TH ST W	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: Frank G Norman 4/28/01 941/755-5861
 DATE: _____ DAYTIME PHONE: _____