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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

	· -			<b>–</b>	
DOCUMENT # 440025					
STEPHENS & WOOD ALUMINUM, INC.					
JILITIL	IND IN TROOP ALDINITIONS	1140		L CORNER BURNE CHARLE CORNER CORNER CURRE CORNER CHARLE CORNER CORNER CORNER CORNER CORNER CORNER CORNER CORNER	
Principal Place of Business Mailing Address				( (\$61)) athir state dett batte (165) bit bien state state den aten aten	
9508 E M L KING BLVD		9508 E M L KING BLVD			
TAMPA FL 33610		TAMPA FL 33610 US		DO NOT WRITE IN THIS SPACE	
US		03		3. Date Incorporated or Qualifed	
				11/19/1973	
2. Principal Place of Business		2a. Mailing Address	- •	4. FEI Number - Applied For	
21		26		59-1506846   Not Applicable   \$8.75 Additional	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required	
City & Stat	e .	City & State		6. Election Campaign Financing 55.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible	
24	25		10	Personal Property Tax.	
9. Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Registered Agent	
STEPHENS, LARRY					
9508 E BUFFALO AVE			82 Street Add	lress (P.O. Box Number is Not Acceptable)	
TAMPA FL 33610			83		
			84 City	85 Zip Code	
	•		' '	FL	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Florid	la Statutes.		
SIGNATURE		ALOTE E	Registered Agent signature require	ed when reinstation) DATE	
12.	Signature, typed or printed name of registered at OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OV	☐ DELETE	1.1 TITLE	☐ Change ☐ Additio	
NAME	STEPHENS, LARRY W		1.2 NAME		
STREET ADDRESS	408 ROYAL PALM WAY		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	TAMPA, FL 33617		1.4 CITY-ST-ZIP	☐ Change ☐ Additio	
TITLE	S	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition	
NAME	WHITEHEAD, AL	V 22 35 - 44	2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS	509 S LARRY CIRCLE BRANDON FL		2.4 CITY-ST-ZIP		
TITLE	DAMIDON FL	☐ DELETE	3.1 TITLE	☐ Change ☐ Additio	
NAME			3.2 NAME	·	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Additio	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	☐ Change ☐ Additio	
MANE			5.2 NAME		
NAME STREET ADDRESS			5.3 STREET ADDRESS	·	
CITY-ST-ZIP ;	Control of the second		5.4 CITY-ST-ZIP		
TITLE	1	DELETE	6.1 TITLE	☐ Change ☐ Additio	

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.

6.2 NAME

6,3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

WIRED