**FILE NOW: FILING FEE AFTER MAY 1 IS $55.00**

FILED
Feb 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1997**

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

DOCUMENT # **487795** **(7)**

1. Corporation Name
**STRUCTURAL WATERPROOFING COMPANY OF FLORIDA, INC**

| Principal Place of Business | Mailing Address |
|---|---|
| 300 PARK AVENUE. NORTH. #201<br>P O DRAWER E<br>WINTER PARK FL 32789 | P O BOX 140<br>P O DRAWER E<br>WINTER PARK FL 32790-0140<br>US |

| | |
|---|---|
| 3. Date Incorporated or Qualified: 10/15/1975 | 3a. Date of Last Report: 04/23/1996 |
| 4. FEI Number: 59-1631257 | ☐ Applied For ☐ Not Applicable |
| 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No | |

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 300 Park Avenue, North | 26 PO Box 140 |
| Suite, Apt. #, etc.<br>22 Suite 201 | Suite, Apt. #, etc.<br>27 |
| City & State<br>23 Winter Park, FL. | City & State<br>28 Winter Park, FL |
| Zip / Country<br>24 32789 / 25 USA | Zip / Country<br>29 32790 / 30 USA |

**9. Name and Address of Current Registered Agent**

STONE, STEVE
725 NORTH MAGNOLIA AVENUE
ORLANDO FL 32803

**10. Name and Address of New Registered Agent**

81 Name: Carl W. Hartley
82 Street Address (P.O. Box Number is Not Acceptable): 200 S. Orange Avenue, Suite 2810
83
84 City: Orlando, FL 85 Zip Code: 32801

**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: Carl W. Hartley — February 20, 1997
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | PD | ☐ DELETE | 11 TITLE | | ☐ Change ☐ Addition |
| NAME | WILLIAMS, LARRY E | | 12 NAME | | |
| STREET ADDRESS | #4 ISLE OF SICILY | | 13 STREET ADDRESS | | |
| CITY-ST-ZIP | WINTER PARK, FL 00000 | | 14 CITY-ST-ZIP | | |
| TITLE | S | ☐ DELETE | 21 TITLE | | ☐ Change ☐ Addition |
| NAME | WILLIAMS, JOY M | | 22 NAME | | |
| STREET ADDRESS | #4 ISLE OF SICILY | | 23 STREET ADDRESS | | |
| CITY-ST-ZIP | WINTER PARK, FL 00000 | | 24 CITY-ST-ZIP | | |
| TITLE | V | ☐ DELETE | 31 TITLE | | ☐ Change ☐ Addition |
| NAME | BILINSKI, MICHAEL E. | | 32 NAME | | |
| STREET ADDRESS | 1140 NORTH LAKE SYBELIA | | 33 STREET ADDRESS | | |
| CITY-ST-ZIP | MAITLAND FL | | 34 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 41 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 42 NAME | | |
| STREET ADDRESS | | | 43 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 44 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 51 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 52 NAME | | |
| STREET ADDRESS | | | 53 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 54 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 62 NAME | | |
| STREET ADDRESS | | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 64 CITY-ST-ZIP | | |

CR2E034 (9/96)

**14.** I do 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.

**SIGNATURE:** Larry E. Williams — 2-3-97 — (407) 645-2021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #