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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 557543

(6)

FORD SHEET METAL, INC.

FILED
Apr 15 1998 8:00am
Secretary of State

Principal Piece of Business Mailing Address  2974 ST. AUGUSTINE ROAD  JACKSONVILLE FL 32207  JACKSONVILLE FL 32207							WIWIT B		·· 4161***	
INVIOUNTI	LLE FL \$22V'	JACKSONVILLE FL 32207	•			DO NOT WRITE IN THIS SPACE				
					}	3. Date Incorporated or Qualified				
						01/19/1978				
	Place of Business	2a. Mailing Address				4. FEI Number		Ar	optied For	
21		26				59-1786566	Ì	No	ot Applicable	
Suite, Apt	1. #, etc.	Suite, Apt #, etc.					\$8	.75	Additional	
22		27				5. Certificate of Status Desired		Fee Ro	equired	
City & Sta	ate	Cily & State				6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution			to Fees	
Zip			Country			8. This corporation owes or has paid the c			angible	
24	252930			Personal Property Tax due June 30. 🔀 Yes 🗌 No					] No	
· · · · · · · · · · · · · · · · · · ·	g. Name and Address of Curren	t Registered Agent		<del> </del>	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registerer	Agent	1		
	ORD, THOMAS E.		В	1 Nar	ne					
	74 ST. AUGUSTINE ROAD		8	2 Stre	et Addres	ss (P.O. Box Number is Not Acceptable)				
JA	ACKSONVILLE FL 32207		_							
			8	3						
			8	4 City	,		85	Zip	Code	
				.]`		F	┡╵	<u> </u>		
agent I	am ramiliar with, and accept the obliga	ations of, Section 607.0505, Fig	orida Statut	es.		ation submits this statement for the purpose his board of directors. I hereby accept the ap-	pointm	ent as	registered	
12.	OFFICERS AND	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRE	CTOF	RS IN 12	
TITLE	PO	☐ DELETE	1.1 TITLE				С	hange	Addition	
NAME	FORD, THOMAS E		1.2 NAM							
STREET ADDRESS			1.3 STRE	ET ADDRE	ss					
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY	ST-ZIP						
TITLE	SID	DELETE	2.1 TITLE				C	hange	Addition	
NAME	FORD, STEPHEN B		2 2 NAM							
STREET ADDRESS			2.3 STAE	ET ADDRE	ss	•• .				
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY	-ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE				C	hange	☐ Addition	
NAME			3.2 NAMI							
STREET ADDRESS			3.3 STRE	ET ADDRES	ss					
CITY - ST - ZIP			3.4. CITY							
TITLE		☐ DELETE	4.1 TITLE				☐ C	hange	Addition	
NAME			4. 2 NAM	E						
STREET ADDRESS			4.3 STRE	1 ADDRE	ss					
CITY-ST-ZIP			4.4 CITY	ST-ZIP		<u> </u>				
TITLE	1	☐ DELET <b>E</b>	5.1 TITLE				CI	nange	☐ Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STRE	ET ADDRES	ss					
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY	ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE			<del></del>	☐ CI	nange	Addition	
NAME	. 1		6.2 NAME							
STREET ADDRESS	<u> </u>		6.3 STRE	T ADDRES	ss					
CITY OT 710			0.4.00797	01 200	1					

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.