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Mar 08, 1999 8:00 am
Secretary of State

03-08-1999 90098 023 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # G92969

1. Corporation Name
SHUTTERHAUS-NU SASH, INC.



Principal Place of Business

Mailing Address

C/O WILLIAM H. COVINGTON
2501 ANVL ST
ST. PETERSBURG FL 33710
US

C/O WILLIAM H. COVINGTON
2501 ANVL ST
ST. PETERSBURG FL 33710
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/23/1984

2. Principal Place of Business

2a. Mailing Address

21 8740 Seminole Blvd

26 8740 Seminole Blvd

4. FEI Number

05-9128516

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #112

27 #112

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State
Seminole

28 City & State
Seminole

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip 33772 Country USA

29 Zip 33772 Country USA

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COVINGTON, WILLIAM H.
2501 ANVL ST N
ST. PETERSBURG FL 33710

81 Name Dennis Thomas

82 Street Address (P.O. Box Number is Not Acceptable)
8740 Seminole Blvd #112

83

84 City Seminole

FL

85 Zip Code 33772

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

William H. Covington

2/24/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D COVINGTON, WILLIAM H	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COVINGTON, WILLIAM H	1.2 NAME	
STREET ADDRESS	2501 ANVL ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	
TITLE	D COVINGTON, JILL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COVINGTON, JILL	2.2 NAME	
STREET ADDRESS	2501 ANVL ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Dennis Thomas
STREET ADDRESS		3.3 STREET ADDRESS	8740 Seminole Blvd #112
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Seminole FL 33772
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

William H. Covington
DIRECTOR

Dennis Thomas
Director

CR2E034 (11/98)