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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000092619 (3)

FIRST COAST SHEET METAL, INC.

Principal Place of Business Mailing Address 3850 WARRINGTON STREET P.O. BOX 60334 JACKSONVILLE FL 32254 JACKSONVILLE FL 32236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3288983 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PRENTICE, MARK Name 2147 RETAW OTREET 485 Oldfield Drive JACKSONVILLE FL 32210 - Orange Park, FL 32073 Street Address (P.O. Box Number is Not Acceptable) 63 84 Zip Code 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 families with and accept the obligations of Section 607.0505, Florida Statutes. resident Trec stated Agent signature required when reinstating) d name of registered apent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE PRENTICE, STEPHANIE L NAME 485 Oldfield Drive 1.2 NAME 2147-RETAW-STREET STREET ADDRESS 1.3 STREET ADDRESS range Park, Fi 32013 JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP __ DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZiP DELETE Change Addition TITLE 5.1 TITLE AME STREET ADDRESS REET ADDRESS 5.3 S CITY - ST - ZIP TITLE DELETE 6.1 1 ☐ Change Addition NAME 629

SIGNATURE: V Your A Put

14. I hereby certify that the information supplied with this filing does not qualify for the exindicated on this annual report or supplemental annual report is true and accurate a officer or director of the corporation or the receiver or truslee empowered to execute

STREET ADDRESS

(President) 1/6/97

HEET ADDRESS

(904) 384-0099

mption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am an its report as required by Chapter 607, Florida Statutes; and that my name appears in

FILED

Jan 15 1998 8:00am

Secretary of State