

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000026380 (2)

1. Corporation Name

LEE & CATES KINGS BAY GLASS, INC.



Principal Place of Business

142 MADISON ST
JACKSONVILLE FL 32204

Mailing Address

142 MADISON ST
JACKSONVILLE FL 32204

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	

3. Date Incorporated or Qualified

04/01/1995

3a. Date of Last Report

4. FEI Number

59-3309574

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

9. Name and Address of Current Registered Agent

BRANT, MOORE, SAPP, MACDONALD & WELLS
50 N LAURA ST
SUITE 3100
JACKSONVILLE FL 32201

10. Name and Address of New Registered Agent

81	Name	Thomas D. Lee III	
82	Street Address (P.O. Box Number is Not Acceptable)		
83	City	142 Madison St.	
84	City	Jacksonville	FL
85	Zip Code	32204	

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

Thomas D. Lee III

Thomas D. Lee, III (Pres)

4-23-96

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	LEE, THOMAS JR	
STREET ADDRESS	142 MADISON ST	
CITY - ST - ZIP	JACKSONVILLE FL 32204	
TITLE	D	☐ DELETE
NAME	PADGETT, RICK Z	
STREET ADDRESS	142 MADISON ST	
CITY - ST - ZIP	JACKSONVILLE FL 32204	
TITLE	D	☐ DELETE
NAME	LEE, THOMAS D III	
STREET ADDRESS	142 MADISON ST	
CITY - ST - ZIP	JACKSONVILLE FL 32204	
TITLE	D	☐ DELETE
NAME	PADGETT, MARY M	
STREET ADDRESS	142 MADISON ST	
CITY - ST - ZIP	JACKSONVILLE FL 32204	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CD	☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	VP D	☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	PD	☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	STD	☐ Change ☐ Addition
4.2 NAME	MAUDE PADGETT	
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	600001800646	
5.4 CITY - ST - ZIP	-04/30/96--01018--015	
5.5	***200.00	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Maude Padgett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-96

904-354-4643

CR2E034 (12/95)

4/28/96