## 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 # P9700033265 (4)

ALL PRO STUCCO OF CENTRAL FLORIDA, INC.

Principal Place of Business Mailing Address 16246 BEARLE RD 16246 BEARLE RD **ORLANDO FL 32828** ORLANDO FL 32828 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1997 2. Principal Place of Business 2a. Mailing Address FEI Numbe Applied For <u>59-3442</u>926 21 Not Applicable Suite, Apt. #, etc. Suite: Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zιρ Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCGILL, HENRY R JR. 16246 BEARLE RD Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32828 83 84 City Zip Code 85 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, typoid or prodest name of registered argort and title if applie able (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DEFICERS AND DIRECTORS 13. Change DELETE Addition TITLE 1.1 THLE MCGILL, HENRY R JR. 1.2 NAME NAME 16246 BEARLE RD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32828 14 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE NAME MCGILL, CHRISTINE A 2.2 NAME STREET ADDRESS 16246 BEARLE RD 2.3 STREET ADDRESS ORLANDO FL 32828 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME

14. Thereby 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE MUSICINE A MIGULE

STREET ADDRESS CITY+ST-ZIP

2/5/98

407-568-0718

**FILED** 

Feb 11 1998 8:00am

Secretary of State