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Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 648697 (1)
1. Corporation Name
GINGERICH GLASS AND ALUMINUM, INC.



Principal Place of Business: 237 INTERSTATE BLVD. SARASOTA FL 34240
Mailing Address: 237 INTERSTATE BLVD. SARASOTA FL 34240-8956

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report		4. FEI Number	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/18/1979		03/20/1996		59-1952806	
City & State		City & State		5. Certificate of Status Desired		Applied For		Not Applicable	
Zip		Country		Trust Fund Contribution		Not Applicable		8.75 Additional Fee Required	
24		25		29		30		5.00 May Be Added to Fees	
City & State		City & State		6. Election Campaign Financing		Trust Fund Contribution		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
Zip		Country		Trust Fund Contribution		Trust Fund Contribution		Yes No	
24		25		29		30		Yes No	

9. Name and Address of Current Registered Agent
BONE, DAVID D
766 HUDSON AVE #B
SARASOTA FL 34236

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PO	DELETE
NAME	GINGERICH, ERVIN O	
STREET ADDRESS	4711 10TH ST.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	STD	DELETE
NAME	GINGERICH, CLARA M	
STREET ADDRESS	4711 10TH ST.	
CITY-ST-ZIP	SARASOTA FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
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 does not qualify for the information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to appear in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)