

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90993 001 ***150.00

DOCUMENT # F00000004495

1. Entity Name

~~ALGOMA DOOR, INC.~~
Ameri-Door, Inc.

*NIC
 #LP
 4/16/01
 (hjm)*

Principal Place of Business

Mailing Address

506 MUNICIPAL AVENUE
 JEFFERSON CITY TN 37760

506 MUNICIPAL AVENUE
 JEFFERSON CITY TN 37760

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-4316700**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRADY, ANTHONY
7630 CURRENCY DRIVE
ORLANDO FL 32809

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PC** ☐ Delete
 NAME **ELLSWORTH, WENDELL E**
 STREET ADDRESS **1001 PERRY STREET**
 CITY-ST-ZIP **ALGOMA WI 54201**

TITLE **Vice President, Director** ☐ Change ☒ Addition
 NAME **Staples, Daniel R.**
 STREET ADDRESS **4 E. Stow Road**
 CITY-ST-ZIP **Marlton NJ 08053**

TITLE **DV** ☒ Delete
 NAME **FOGLESONG, HARRY E**
 STREET ADDRESS **506 MUNICIPAL AVENUE**
 CITY-ST-ZIP **JEFFERSON CITY TN 37760**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TSD** ☐ Delete
 NAME **ROE, RODERICK J**
 STREET ADDRESS **506 MUNICIPAL AVENUE**
 CITY-ST-ZIP **JEFFERSON CITY TN 37760**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roderick J. Roe **Roderick J. Roe Sec/Treas. 4/20/01 865-471-6300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)