

# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT # 182054**

1. Entity Name  
**FLORIDA MADE DOOR CO.**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 DEC 13 AM 11:06

Principal Place of Business  
**13700 VIRGINIA AVENUE  
ASTATULA, FL 34705-0128 US**

Mailing Address  
**P O BOX 128  
ASTATULA, FL 34705-0128 US**

2. Principal Place of Business  
**1 N. Dale Mabry Hwy.  
Suite, Apt. #, etc.  
#950**

3. Mailing Address  
**100 N. Tampa Street #4100  
Suite, Apt. #, etc.  
Attention: K Wheeler**

City & State  
**Tampa, FL**

City & State  
**Tampa, FL**

10112004 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-0737960**

Applied For  
Not Applicable

Zip  
**33609**

Country

Zip

Country

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

## 6. Name and Address of Current Registered Agent

**EGER, FRANK L JR  
13700 VIRGINIA AVENUE  
ASTATULA, FL 34705**

## 7. Name and Address of New Registered Agent

Name  
**Corporation Service Company**

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

**1201 Hays Street**

City  
**Tallahassee**

**FL**

Zip Code  
**32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**Brian Courtney  
Asst. V. Pres.**

Signature, typed or printed name of registered agent and title is acceptable.

(NOTE: Registered Agent signature required when reinstating)

**12/13/04**  
DATE

**Amended AR is \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PS  
EGER, FRANK L JR  
13700 VIRGINIA AVE.  
ASTATULA, FL 34705** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VPT  
EGER, JOSEPH P  
375 WEST HAZELTON AVE  
STOCKTON, CA 95203** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**P  
300043406153** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**V  
Harshbarger, Paul  
13700 Virginia Avenue  
Astatula, FL 34705** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**V  
Brown, Bob  
13700 Virginia Avenue  
Astatula, FL 34705** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**T  
Rubin, Arnold  
1 N. Dale Mabry Hwy. #950  
Tampa, FL 33609** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
Murphy, Rose  
1 N. Dale Mabry Hwy. #950  
Tampa, FL 33609** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**AS  
Hewlett, Trevor  
1 N. Dale Mabry Hwy. #950  
Tampa, FL 33609** ☐ Change ☒ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**December 9, 2004**  
Date

**813-739-1814**  
Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 078660 4303940

AUTHORIZATION : *Patricia Pizote*

COST LIMIT : \$ 61.25

ORDER DATE : December 13, 2004

ORDER TIME : 10:10 AM

ORDER NO. : 078660-020

CUSTOMER NO: 4303940

CUSTOMER: Ms. Kathleen Wheeler  
Holland & Knight LLP  
Suite 4100  
100 North Tampa Street  
Tampa, FL 33602

CHANGE OF AGENT  
AMENDED ANNUAL REPORT

NAME: FLORIDA MADE DOOR CO.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

RECEIVED  
04 DEC 13 AM 10:42  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA