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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 251613

ADAMS BUILDING COMPONENTS, INC.

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Principal Place	e of Business	Mailing Address							
1801 7TH STREET S W 1801 7TH STREET S W						1			
WINTER HAVEN FL 33880-4376 WINTER HAVEN FL 33880-4			376			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed.	,,,,,,		
						09/27/1961			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	App	lied For	
21		26				59-0937875	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	dditional	
22	ر در محمد محمد المحمد ا	27			-	5. Certificate of Status Desired	Fee.Red	uired	
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	vlay Be	
23		28				Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current y		_ ·	
24	25	25 29 30				Personal Property Tax. Yes No			
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Regis	stered Agent		
			- 1	81 N	iame			Ì	
	MS, GREGORY J		}	82 S	treet Addre	ss (P.O. Box Number is Not Acceptable)			
9 ENCLAVES DRIVE				-					
	5 EDGEWATER CIR.		[83					
WIN	TER HAVEN FL 33884		-	84 C	ity		85 Zip C	orle	
•				•	ity		FL S E		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the ab	ove-na	med corpo	ration submits this statement for the purp	ose of changing its	registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was auti	norizea	by the	corporation	n's board of directors. I hereby accept the	appointment as reg	istereu	
	in lamilal with, and accept the cong	adone or, educati our leader i forte				,			
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NOTE: R	legistered	Agent sig	nature required		ATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE			
กกับ	VD	. DELETE	1,1 TIT	LE		•	☐ Change	☐ Addition	
NAME	MOORE, GARY		1.2 NA	ME				. 1	
STREET ADDRESS	90 JAMES SCOTT COURT		4 4 4 4	DEET ADI	DRESS				
CITY-ST-ZIP	WINTER HAVEN FL		1.3 ST	VEE! VO				ļ	
TITLE				Y-ST-ZII	,	· .			
NAME	l PD	☐ DELETE		Y-ST-ZII	,		☐ Change	☐ Addition	
	l '	DELETE	1.4 CIT	Y-ST-ZII LE	P	· .	☐ Change	☐ Addition	
	ADAMS, GREGORY J	DELETE	1.4 CF 2.1 TIT 2.2 NA	Y-ST-ZII LE			☐ Change	☐ Addition	
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14. 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90053 035 ***150.00