CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 1:38

DOCUMENT # 261611 (8)

1. Corporation Name

PREFAB BUILDING COMPONENTS INC

Principal Place of Business	Mailing Address
336 11TH STREET ~~PO BOX 591~~ HOLLY HILL FL 32117-2020	P O BOX 250591 ~~PO BOX 591~~ HOLLY HILL FL 32125 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/07/1962
3a. Date of Last Report: 04/11/1994

2. Principal Place of Business
21: 336 LPGA Blvd
22: Suite, Apt. #, etc:
23: City & State: Holly Hill FL
24: Zip: 32117
25: Country: USA

2a. Mailing Address
26: P.O Box 250591
27: Suite, Apt. #, etc:
28: City & State:
29: Zip:
30: Country:

4. FEI Number: 59-0975257 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

ALEXANDER, STANTON
336-11TH ST
HOLLY HILL FL 32117

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 336 LPGA Blvd
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: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when mandated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	11 TITLE	CEO + Pres	☑ Change ☐ Addition
NAME	ALEXANDER,STANTON	12 NAME	Alexander Stanton	
STREET ADDRESS	336-11TH ST.	13 STREET ADDRESS	336 LPGA Blvd	
CITY ST ZIP	HOLLYHILL FL	14 CITY ST ZIP	Holly Hill FL 32117	
TITLE	S	21 TITLE	Secretary - Treasurer	☑ Change ☐ Addition
NAME	ALEXANDER, SUZANNE	22 NAME	Alexander Suzanne	
STREET ADDRESS	336 11TH STREET	23 STREET ADDRESS	336 LPGA Blvd	
CITY ST ZIP	HOLLY HILL FL	24 CITY ST ZIP	Holly Hill FL 32117	
TITLE	AS	31 TITLE	same	☑ Change ☐ Addition
NAME	BELTRAMI, MARICE	32 NAME		
STREET ADDRESS	336 11TH STREET	33 STREET ADDRESS	336 LPGA Blvd	
CITY ST ZIP	HOLLY HILL FL	34 CITY ST ZIP	Holly Hill FL 32117	
TITLE	T	41 TITLE		☑ Change ☐ Addition
NAME	STANDFAST, JOE	42 NAME	Delete	
STREET ADDRESS	336 11TH STREET	43 STREET ADDRESS		
CITY ST ZIP	HOLLY HILL FL	44 CITY ST ZIP		
TITLE	AT	51 TITLE	same	☑ Change ☐ Addition
NAME	ALEXANDER, MERRIDY W	52 NAME		
STREET ADDRESS	336 11TH	53 STREET ADDRESS	336 LPGA Blvd	
CITY ST ZIP	HOLLY HILL FL	54 CITY ST ZIP	Holly Hill FL 32117	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: ✓ [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-95
Date

904-255-4806
Daytime Phone #

0403383 FP