## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 352036

(8)

CENTRAL DOOR COMPANY INC

FILED							
Apr 29 1997 8:00am							
Secretary of State							

Principal Place of Business	Mailing Address	
2500 EXECUTIVE RD. P.O. BOX 1465 WINTER HAVEN FL 33884-1163	2500 EXECUTIVE RD. P.O. BOX 1465 WINTER HAVEN FL 33884-1163	
		9 Date Incorporated or Qualified   3e Date of Last Report

				09/10/1969	05/01/1996	05/01/1996		
<del></del>	lace of Business	2a. Mailing Address		4. FEI Number .	Applied For			
21				59-1272478	<del></del>	Not Applicable		
22 Suite, Apr.	<b></b>			5. Certificate of Status Dosired	[M] TT	5 Additional Required		
City & State		City & State	City & Stato		6. Election Campaign Financing \$5.00 May Be			
23	28			Trust Fund Contribution		ed to Fees		
Zip	Country	Zφ	Count	ry	8. This corporation has liability for	intangible tax unde	r s. 199.032,	
24	25	29	30			Yes 🔀 No		
	9. Name and Address of Currer	it Registered Agent			10. Name and Address of New Re	gistered Agent		
GIRO	DUARD,RAYMOND P		8	1 Name				
2500	EXECUTIVE RD		8:	Street	Address (P.O. Box Number is Not Acceptal	olo)		
WINTER HAVEN FL 33880			"	atreet Address (n.o. box Normaer is Not Acceptable)				
,			8	3				
			8	4 City		85 Z	ip Code	
							•	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, Fl	tes, the abo authorized b lorida Statuti	ve-named by the cor es.	d corporation submits this statement for the reporation's board of directors. I hereby acce	ourpose of changing pt the appointment	g ils registered as registered	
SIGNATURE	Signature, typed or printed name of registered age	and an of title dispersional life.	II. transace 4		e required when reinstating)	DATE		
12.	OFFICERS AN		13.	geni signature	ADDITIONS/CHANGES TO OFFIC		ODS IN 12	
TITLE	PD	k DELFTE	1,1 TALE		ADDITIONS/CHANGES TO OFFIC	Chang		
NAME	GIROUARD, RAYMOND P	<b>K</b> ) but to	1.2 NAME		<b>\</b>	L., Onong	ic C T TOOMON	
	2500 EXECUTIVE RD							
STREET ADDRESS	WINTER HAVEN, FL 00000			E1 ADDRESS				
CITY-ST-ZIP		DELETE	1.4 CITY-		<u> </u>	Oten	A PERSON	
TITLE	STD   Girouard, Evelyn S	FT DETECT	2.1 1ITLE		1	Chang	e [_] Addition	
NAME			2.2 NAME					
STREET ADDRESS	2500 EXECUTIVE RD		2.3 \$1RE1	ET ADDRESS			ļ	
CITY-ST-ZIP	WINTER HAVEN, FL 00000		2.4 C(1Y-S1-ZIP			77.0		
TIŢĻĒ	VP	DELETE	3.1 TITLE		President/Director	K Chang	e L. Addition	
NAME	GIROUARD, SCOTT R.		3.2 NAMÉ				ļ	
STREET ADDRESS	2500 EXECUTIVE ROAD		3.3 STREE	ET ADDRESS			1	
CITY-ST-ZIP	WINTER HAVEN FL		34 CITY	- ST - ZIP				
TITLE		DELETE	4 1 TPLE			Chang	e 🔲 Addition	
NAME			4. 2 NAM	F			ļ	
STREET ADDRESS			4.3 STRE	1 ADDRESS				
CITY-ST-ZIP			4.4 CITY -	ST-ZIP				
TITLE		☐ DELETE	5.1 THLE		ļ	☐ Chang	e 🔲 Addition	
NAME			5.2 NAME				ļ	
STREET ADDRESS			5.3 STRE	T ADDRESS			Ì	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	<u> </u>			
TITLE		DELETE	6 1 1/1LE			Chang	e Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CHY	\$1-7IP				
	by certify that the information supplie	d with this filing does not quali			stated in Section 119.07(3)(i), Florida Statute	s. I further certify th	nat the	

1. I do 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 offect as if made under eath; 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 eddition.

CIGNATURE SCOTT R. SCIROUARD PRES.

4-21-97

(941)324-3719