

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 417317 (5)

1. Corporation Name

GLASSALUM INSTALLATIONS, INC.

Principal Place of Business

C/O NORTEK INC.
50 KENNEDY PLAZA
PROVIDENCE RI 02903
US

Mailing Address

% NORTEK, INC
50 KENNEDY PLAZA
PROVIDENCE RI 02903



3. Date Incorporated or Qualified

01/22/1973

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1438197

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

10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYES STREET
STE 105
TALLHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607 (6)(b) and 607 (15)(b), 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 (6)(b), Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent, or the registered agent's authorized representative, or the registered agent's authorized representative.

Signature of the person who is the registered agent, or the registered agent's authorized representative, or the registered agent's authorized representative.

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME DONNELLY, KEVIN, W
STREET ADDRESS 50 KENNEDY PLAZA
CITY-STATE-ZIP PROVIDENCE RI ☐ DELETE

TITLE PD
NAME BREADY, RICHARD L
STREET ADDRESS NORTEK, INC., 50 KENNEDY PLAZA
CITY-STATE-ZIP PROVIDENCE RI ☐ DELETE

TITLE VTD
NAME HARRIS, RICHARD J.
STREET ADDRESS NORTEK, INC., 50 KENNEDY PLAZA
CITY-STATE-ZIP PROVIDENCE RI ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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)(k), 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 this 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 additional page with my address.

SIGNATURE:

Kevin W. Donnelly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEVIN W. DONNELLY

5/01/96 (401) 751-1600

CR2E034 (12/95)