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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 49245

(9)

Mailing Address

STUART LOCKSMTH, INC.

F	ILEL	)
Feb 06 1	998	8:00am
Secret	ary o	f State



<del>57-W-03CEO</del> I STUART FL 34 US	westr \$10 & Dixie Hwy 1994 New Adda	ST-W-000EOLA STR STUART FL 34994 US ESS	·	DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE
	70 600 770000			12/12/1975	
2. Principal Pia	ace of Business	2a. Mailing Address		4, FEI Number	Applied For
21 310 S	. Dixie Hay IA	26 310 Sb DIXIO	e Hwy IA	59-1643461	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.	FL.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 341	97	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip 11000	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29 3477/	30		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
STE	ELE, DONALD		81 Name		
539	O S.E. REDWOOD AVE.		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
STL	JART FL <u>3</u> 34 <del>8</del> 4				
	34117		83		
	~ 1141		84 City		85 Zip Code
			O4 City	FL	Lip Code
agent. I an	n familiar with, and accopt the obligat	ions of, Section 607.0505, Fl	orida Statutes.	ration's board of directors. I hereby accept the appropried when reinstalling)	
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	STEELE, DONALD		1.2 NAME		
STREET ADDRESS	5390 S.E. REDWOOD AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	STUART FL 34117		1.4 CITY - ST - ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE		Change Addition
NAME	Steele, Lynn		2.2 NAME		
STREET ADDRESS	5390 S.E. REDWOOD AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	STUART FL		2. 4 C(TY - S1 - Z(P		
TITLE		☐ DELETE	3.1 THTLE		Change Addition
NAME -			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CI1Y - S1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		<u> </u>
THILE		☐ DELFTE	5.1 1111.6		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - 7IP		
THILE		∟J DELETE	6.1 TOLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - S1 - ZIP		Tark all as at a first
indicated of officer or of	on this annual report or supplemental.	annual report is true and acc ver or trustee empowered to ynient with an address.	curate and that my sign	in Section 119.07(3)(i), Florida Statutes. I further of sture shall have the same legal effect as if made ur equired by Chapter 607, Florida Statutes; and that	nder oath; that I am an my name appears in