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 **FILED**

May 02 1997 8:00am

Secretary of State

951-218.0496

DOCUMENT # F93000000251 (9)

LAPP ROOFING & SHEET METAL CO., INC.

						-		ARIE LIBEL VIII	
Principal Place of Business Mailing Address							8 8 11 1 B (() 0	4119 11861 8119	1 (184 (188)
2860 OME AVE	NUE	2860 OME AVENUE							
DAYTON OH 45414		DAYTON OH 45414-5119]				
US		US					1 - 5		
						3. Date Incorporated or Qualified		te of Last R	ieport
9 Principal P	loop of Business	2a. Mailing Address				01/20/1993	1 00/0	1/1996	
	lace of Business	ê				4. FEI Number Applied For 31-1125249 Not Applied For			
Suite, Apt.	# atc	Suite, Apt. #, etc.				¢0.75 A.100			
22	w, 0 (0.	27				5. Certificate of Status Desired		•	Additional equired
City & State	<u> </u>	City & State				6 Floating Committee Financian		·	
23	•	28				6. Election Campaign Financing Trust Fund Contribution	\Box		May Be to Fees
Zip	Country	Zip Country				· · · · · · · · · · · · · · · · · · ·			
24	25	29	30	•		This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curren		1001			10. Name and Address of New Registered Agent			
C T	CORPORATION SYSTEM	···	····	B1	Name				
	SOUTH PINE ISLAND ROAD		-		Ob and Addison	(D.O. D	1-1		
	NTATION FL 33324			B2	Street Addre	t Address (P.O. Box Number is Not Acceptable)			
	ATAMON TE GOOLT		<u> </u>	B3					
			L	_].					
			Į;	B4	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.									
1									
SIGNATURE Signalure, typed or printed name of registered agent and title if applicable. (NOTL: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS ANI	D DIRECTORS	DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VP .	DELETE	11111	Ē		P		Change	Addition
NAME	LESCH, JAMES E.	• 1	1.2 NAM	ЛE	H-1	LT, JAMES			
STREET ADDRESS	4204 TRADWIND CT.		1.3 STF	EET A	DDRESS /4	00-2 LAKE POINTE	WAY		
CITY-ST-ZIP	ENGLEWOOD OH		1.4 CIT	Y-ST-	ZIP C	NTERVICLE, OH Y	5459		
TITLE	AS	DELETE	21111	.F				Change	☐ Addition
NAME	LAPP, PAMELA		2.2 NA	ΜE					j
STREET ADDRESS	860 SCENIC KNOLL		2.3 STF	REET A	DDRESS	*	1.		j
CITY-ST-ZIP	TIPP CITY OH 45371		2. 4 CIT	Y - \$1	- ZIP				
TITLE	SD	DELETE	3.1 7(1)	.E				Change	Addition
NAME	CLOUD, JOHN M		3.2 NA	ΛE					1
STREET ADDRESS	1834 QUAIL HOLLOW		3 3 STREE		DDRESS				
CITY-ST-ZIP	DAYTON OH 45459		3 4. CITY-		ZIP				
TITLE	<u>-</u>		4.1 1111	.E				Change	☐ Addition
NAME	AUKERMAN, MYRON C	* \	4.2 NAM						
STREET ADDRESS			4.3 STF	EET A	DORESS				
City-St-ZIP	DAYTON OH 45424		4.4 CITY-		ZIP				
TITLE	PTDC	DELETE	5.1 101	E.				Change	☐ Addition
NAME	LAPP, DUANE E		5.2 NA	٧£			•	•	J
STREET ADDRESS	860 SCENIC E.		5.3 STR	EE1 A	DDRESS 86	o scenic knoll			
CITY-ST-ZIP	TIPP CITY OH		5.4 CIT	Y-ST-	ZIP TI	PP CITY, OH 45371			
TITLE	V	DELETE	6 1 TITI			1		Change	Addition
NAME	SNYDER, WAYNE	, WAYNE " \ 6		νŧΕ					
STREET ADDRESS	6461 BRUSHWOOD COURT		63 STF	REET A	DDRESS				
CITY, CT., 7ID				EACITY, ST. 7(P					

14. 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 effect as if made under oath; that I am an officer or director of the corporation on 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 chapted of in an intrachment with an address, CIGNATURE: Y