

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

**FILED**  
**May 11 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F97000006327 (7)**

1. Corporation Name  
**WINDSOR DOOR, INC.**

Principal Place of Business <b>1150 STATE DOCKS RD          EUFULA AL 36027</b>	Mailing Address <b>1150 STATE DOCKS RD          EUFULA AL 36027</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 100 MURPHY DRIVE</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23 MAUMELLE AR</b> Zip <b>24 72113</b>	2a. Mailing Address <b>25 PO Box 8915</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28 Little Rock AR</b> Zip <b>29 72219-8915</b>	Country <b>25 Pulaski</b>	Country <b>30 Pulaski</b>
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3. Date Incorporated or Qualified <b>12/02/1997</b>	4. FEI Number <b>63-1188455</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>UNITED CORPORATE SERVICES INC          801 N.E. 167TH ST., STE 300          N MIAMI BEACH FL 33162</b>	10. Name and Address of New Registered Agent <table border="1"> <tr> <td>81 Name</td> <td></td> </tr> <tr> <td>82 Street Address (P.O. Box Number is Not Acceptable)</td> <td></td> </tr> <tr> <td>83</td> <td></td> </tr> <tr> <td>84 City</td> <td>85 Zip Code</td> </tr> </table>	81 Name		82 Street Address (P.O. Box Number is Not Acceptable)		83		84 City	85 Zip Code
81 Name									
82 Street Address (P.O. Box Number is Not Acceptable)									
83									
84 City	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	President
NAME	AMMERMAN, ROBERT T	1.2 NAME	R. Howard Burns
STREET ADDRESS	1150 STATE DOCKS RD	1.3 STREET ADDRESS	100 Murphy Drive
CITY-ST-ZIP	EUFULA AL	1.4 CITY-ST-ZIP	Maumelle AR 72113
TITLE	VTD	2.1 TITLE	VP of Mfg/Oper
NAME	BLACKMON, CHARLES	2.2 NAME	Phillip C. Sawyer
STREET ADDRESS	1150 STATE DOCKS RD	2.3 STREET ADDRESS	100 Murphy Drive
CITY-ST-ZIP	EUFULA AL	2.4 CITY-ST-ZIP	Maumelle, AR 72113
TITLE	S	3.1 TITLE	VP of Sale/Marketing
NAME	SAVAGE, ANNE M	3.2 NAME	George F. Cronkhite
STREET ADDRESS	1150 STATE DOCKS RD	3.3 STREET ADDRESS	100 Murphy Drive
CITY-ST-ZIP	EUFULA AL	3.4 CITY-ST-ZIP	Maumelle AR 72113
TITLE	VAS	4.1 TITLE	Controller/Asst Sec
NAME	VOELKERT, JOEL R	4.2 NAME	W. Bruce Sossamon
STREET ADDRESS	1150 STATE DOCKS RD	4.3 STREET ADDRESS	100 Murphy Drive
CITY-ST-ZIP	EUFULA AL	4.4 CITY-ST-ZIP	Maumelle AR 72113
TITLE	S	5.1 TITLE	VP & Asst Sec
NAME	WOODHAM, PEGGY S	5.2 NAME	Charles Blackmon
STREET ADDRESS	1150 STATE DOCKS RD	5.3 STREET ADDRESS	1150 State Docks Rd
CITY-ST-ZIP	EUFULA AL	5.4 CITY-ST-ZIP	Eufaula AL 36027
TITLE	AS	6.1 TITLE	Asst VP
NAME	NEWHOUSE, DOUGLAS L	6.2 NAME	Anne M. Savage
STREET ADDRESS	1150 STATE DOCKS RD	6.3 STREET ADDRESS	1150 State Docks Rd
CITY-ST-ZIP	EUFULA AL	6.4 CITY-ST-ZIP	Eufaula AL 36027

14. I 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 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.

CR2E034 (10/97)