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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G66488** (9)

1. Corporation Name

FLORIDA SEALING SYSTEMS, INC.

Principal Place of Business

Mailing Address

**705 LIVE OAK STREET
NEW SMYRNA BEACH FL 32168
US**

**705 LIVE OAK ST
UNIT 705
NEW SMYRNA BEACH FL 32168-7410
US**

3. Date Incorporated or Qualified

10/26/1983

3a. Date of Last Report

05/01/1996

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

10. Name and Address of New Registered Agent

**KINSEY, RICHARD D.
379 WILD ORANGE DRIVE
NEW SMYRNA BEACH FL 32168**

81 Name

KINSEY, RICHARD D.

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

705 LIVE OAK STREET

83 **UNIT #705**

84 City

NEW SMYRNA BEACH

FL

85 Zip Code
32168

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

Signature type: For printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KINSEY, RICHARD D.	
STREET ADDRESS	379 WILD ORANGE DRIVE	
CITY - ST - ZIP	NEW SMYRNA BEACH FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	KINSEY, KATHLEEN A.	
STREET ADDRESS	379 WILD ORANGE DRIVE	
CITY - ST - ZIP	NEW SMYRNA BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KINSEY, KATHLEEN A.	
STREET ADDRESS	379 WILD ORANGE DRIVE	
CITY - ST - ZIP	NEW SMYRNA BEACH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ZOCK, JAMES L.	
STREET ADDRESS	379 WILD ORANGE DR	
CITY - ST - ZIP	NEW SMYRNA BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KINSEY, RICHARD D.	
1.3 STREET ADDRESS	705 LIVE OAK STREET	
1.4 CITY - ST - ZIP	NEW SMYRNA BEACH, FL 32168-7410	
2.1 TITLE	VTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KINSEY, KATHLEEN A.	
2.3 STREET ADDRESS	705 LIVE OAK STREET	
2.4 CITY - ST - ZIP	NEW SMYRNA BEACH, FL 32168-7410	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	ZOCK, JAMES L.	
4.3 STREET ADDRESS	404 TURNBULL BAY ROAD	
4.4 CITY - ST - ZIP	NEW SMYRNA BEACH, FL 32168-6235	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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 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.

SIGNATURE:

James L. Zock
James L. Zock - Secretary

04/22/97

904/427-5612

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CR2E034 (9/96)