SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 19 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS H01216 DOCUMENT # H & L DOOR COMPANY, INC. Principal Place of Business Mailing Address 1225 BENNETT DR. 138 1225 BENNETT DR. 138 LONGWOOD FL 82750 LONGWOOD FL 32750 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 04/30/1984 07/15/1996 Principal Place of Business FEI Number Applied For 2a. Mailing Address 59-2431437 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Country Zip This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. ☐ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BAGGETT, HAROLD J. 81 715 TROPIC HILL Street Address (P.O. Box Number is Not Acceptable) 82 **ALTAMONTE SPRINGS FL 32701** 83 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 family with, and accept the obligations of accion 607.0505, Florida Statutes. anolo SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1649 13. DELETE Change TITLE 1.1 TITLE BAGGETT, HAROLD J. NAME 1.2 NAME 715 TROPIC HILL STREET ADDRESS 1.3 STREET ADDRESS **ALTAMONTE SPRINGS FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITI F 2.1 TITLE BAGGETT, FRANCES L. 2.2 NAME 715 TROPIC HILL STREET ADDRESS 2.3 STREET ADDRESS ALTAMONTE SPRINGS FL CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition DELETE Change 3.1 TOTLE HESTER, DARLENE NAME 3.2 NAME HESTER, DARLENE 107 E CITRUS ST STREET ADDRESS 3.3 STREET ADDRESS 107 E CITRUS ST. ALTAMONTE SPRINGS FL CITY-ST-ZIP ITY-ST-ZIP ALTMONTE SPRINGS FL DELETE Change Addition TITLE 4.1 1LE NAME AME 152 S. CARPENTER AVE. 4.3 REET ADDRESS STREET ADDRESS ORANGE CITY FL CITY-ST-ZIP TY-ST-ZIP DELETE Change noititbA ... TITLE 51 TITLE NAME. 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

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 logal effect as if made under eath; 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.

6.4 CITY - \$1 - ZIP

6.3 STREET ADDRESS

6.2 NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

0-15-97