## FLE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED PROFIT Feb 10 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J17639 R.F. LUSA & SONS SHEET METAL INC. Principal Place of Business Mailing Address 1724 FAIRBANKS ST P O BOX 8068 LAKELAND FL 33805 LAKELAND FL 33802-8068 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1986 2. Principal Place of Business Mailing Address Applied For FAIRBANKS SŁ PO BOX 8**0**68 21 26 59-2684635 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 又 5. Certificate of Status Desired 22 Fee Required \$5.00 May Be 6. Election Campaign Financing 33802 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROBERT F. LUSA, JR. 5305 LAKE LUTHER RD. 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33805 83 City 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 add accept the obligations of, Section 607.0505, Florida Statutes. Robort F Usa 12 Tr. Registered Agent signature required when reinstating) diagont and title flappicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TITLE Change Addition NAME LUSA, ROBERT F, SR. 1.2 NAME STREET ADDRESS 5305 LAKE LUTHER RD. 1.3 STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33805 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition LUSA, ROBERT F., JR. NAME 22 NAME STREET ADDRESS 1405 TIMBERIDGE DRIVE 2.3 STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33809 2.4 CITY-ST-ZiP DELETE TITLE 3.1 TITLE Addition NAME LUSA, JOSEPH E. 3.2 NAME STREET ADDRESS 1210 HAMMOCK SHADE DR. 3.3 STREET ADDRESS LAKELAND FL 33809 CITY - ST - ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Addition LUSA, NORMA G. NAME 4.2 NAME 5305 LK. LUTHER ROAD STREET ADDRESS 4.3 STREET ADDRESS LAKELAND FL 33805 CITY - ST - ZIP 4.4 CITY-ST-ZIP ☐ DELF1E TITLE 5.1 TITLE ☐ Change Addition NAME COLLINS, DENNIS M 5.2 NAME 4401 SUGARTREE DRIVE WEST STREET ADDRESS 5.3 STREET ADDRESS LAKELAND FL 33813 CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 requirect or rusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or officer in the requirement of the requir

SIGNATURE:

CITY-ST-ZIP

1-5-98

941-682-0798