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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J93282

(8)

AWNINGS INCORPORATED OF OCALA

Principal Plac % JERENE GI 3050 N.W. 21 OCALA FL 34 US	ing Address ERENE GEIGER D N.W. 21ST STREET NLA FL 34475-4169				3	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/22/1987						
	lace of Business	2a.	2a. Mailing Address				4	, FEI Number	Ap	plied For		
21				26				_	59-2873482		t Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5	i. Certificate of Status Desired	8.75 A Fee Re	Additional quired	
City & State			28					6	6. Election Campaign Financing \$5.00 Mar Trust Fund Contribution Added to Fo			
Zip	\vdash	Country	ļ,	Zip	Country			8	I. This corporation owes or has paid the current			
24	25		29		30	,			Personal Property Tax due June 30. Yes	-	No	
9. Name and Address of Current Registered Agent GEIGER, JERENE						81	Name	10	10. Name and Address of New Registered Agent			
OC	50 N.W. 21ST (ALA FL 32675					82 83 84	City		P.O. Box Number is Not Acceptable)	1		
I office or r	registered agent.	or both, in the Sta	ate of Florid	07.1508, Florida Statut da: Such change was i i, Section 607.0505, Fl	authorize	d by	the corpora	ation's	on submits this statement for the purpose of cha- board of directors. I hereby accept the appoints	nging its nent as	s registered registered	
SIGNATURE Signature, typed or printed name of regulatined agent and title if appricable (NOTE)						d Age	Huy int signature ed	uired whe	en reinsteling) 4/21/98			
12.		OFFICERS A	AND DIREC		13.				ADDITIONS/CHANGES TO OFFICERS AND DIF	ECTOR	S IN 12	
TITLE	D			☐ DELETE	1,1 (1	ITLE				Change	Addition	
NAME	GEIGER, JERENE					1.2 NAME						
STREET ADDRESS 3050 N.W. 21ST STREET					1.3 \$	1.3 STREET ADDRESS						
CITY-ST-ZIP	OCALA FL					1.4 City-St-ZiP						
TITLE	D			☐ DELETE	21 TI	TLE				Change	Addition	
NAME	GLIODII, OTDITET					2 2 NAME					ı	
STREET ADDRESS	The state of the s					23 STREET ADDRESS						
CITY-ST-ZIP	OCALA FL				2.40	HTY-S	17-2IP					
TITLE				☐ DELETE	3.1 Ti	TLE				Change	Addition	
NAME					3.2 N	AME						
STREET ADDRESS					3.3 \$	TREET	ADDRESS					

6.4 CITY - ST - ZIP CITY-ST-ZIP 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 agreequired 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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4. 2 NAME

DELETE

DELETE

□ DELETE

SIGNATURE: Terewe G.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

TITLE

NAME

TITLE NAME

NAME

Change

Change

Change

☐ Addition

Addition

Addition

FILED

Apr 28 1998 8:00am

Secretary of State