

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K88604** (9)

1. Corporation Name

EXCEL MILLWORK & MOULDING, INC.



Principal Place of Business

**BOX 529
MIDWAY FL 32343**

Mailing Address

**BOX 529
MIDWAY FL 32343**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**RUIS, D. RAY
RT 4 BOX 438
TALLAHASSEE FL 32304**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

05/16/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2947936

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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, typed or printed name of registered agent and title if applicable

(If not, Registered Agent signature required when not acting)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**VD
RUIS, D. RAY
2017 FAULK DR
TALLAHASSEE FL**

TITLE ☐ DELETE

**PD
RUIS, JERRY W.
2400 CLARA KEE BLVD
TALLAHASSEE FL**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP**

TITLE ☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

**1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP**

☐ Change ☐ Addition

**2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY-STATE-ZIP**

☐ Change ☐ Addition

**3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY-STATE-ZIP**

☐ Change ☐ Addition

**4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY-STATE-ZIP**

☐ Change ☐ Addition

**5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP**

☐ Change ☐ Addition

**6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY-STATE-ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Jerry W. Ruis**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 2, 1996

Date

(904) 576-7228

Telephone Number

CR2E034 (12/95)