FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 28 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K93085 (4)

1. Corporation Name
POTVIN CARPENTRY, INC.

Principal Place of Business	Mailing Address
14221 OAK RIDGE DRIVE DAVIE FL 33325	14221 OAK RIDGE DRIVE DAVIE FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/05/1989
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business	2a. Mailing Address
21 1530 Quail Drive	26 1530 Quail Drive
Suite, Apt. #, etc. 22 Apt 4	Suite, Apt. #, etc. 27 Apt. 4
City & State 23 West Palm Beach	City & State 28 West Palm Beach
Zip / Country 24 33409 / 25 Palm Beach	Zip / Country 29 33409 / 30 Palm Beach

4. FEI Number: 65-0126007 ☐ 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

9. Name and Address of Current Registered Agent

COUGHLIN, CASEY WILLIAM
1401 UNIVERSITY DRIVE
SUITE 600
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name: Jean A Potvin
82 Street Address (P.O. Box Number is Not Acceptable): 1530 Quail Drive Apt. 4
83
84 City: West Palm Beach FL 85 Zip Code: 33409

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: Jean A. Potvin JEAN A. POTVIN 4/21/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	11 TITLE	PST ☑ Change ☐ Addition
NAME	POTVIN, JEAN A.	12 NAME	Potvin Jean A.
STREET ADDRESS	14221 OAK RIDGE DRIVE	13 STREET ADDRESS	1530 Quail Drive Apt. 4
CITY-ST-ZIP	DAVIE FL	14 CITY-ST-ZIP	West Palm Beach, FL 33409
TITLE	D	21 TITLE	D ☑ Change ☐ Addition
NAME	POTVIN, JEAN A.	22 NAME	Potvin, Jean A
STREET ADDRESS	14221 OAK RIDGE DRIVE	23 STREET ADDRESS	1530 Quail Drive Apt. 4
CITY-ST-ZIP	DAVIE FL	24 CITY-ST-ZIP	West Palm Beach, FL 33409
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-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)(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: Jean A. Potvin JEAN A. POTVIN 4/25/95 (407)684-1324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

0234187 CP