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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K96159

(4)

ANCHOR COATINGS OF LEESBURG, INC.

May 02 1997 8:00am Secretary of State

Principal Place of Business Mailing Address							
l		-	Mailing Address				
2290 TALLY ROAD LEESBURG FL 34748		LEESBURG FL 34748-3316	2280 TALLY ROAD LEESRURG FL 34748-3316				
US		US					
					3. Date Incorporated or Qualified	3a. Date of Last Report	
					06/15/1989	05/01/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		59-2952529	Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Sa.75 Additional		
City & State		City & State			Fee Required		
23		}		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be		
Zip	Country	28]	Country				
24	25		30		8. This corporation has liability for in Florida Statutes	Yes No	
· E-4	9. Name and Address of Curre				10. Name and Address of New Reg		
PUI	LUM, J. STEPHEN		81	Name			
	O W. CITIZENS BLVD.			6	(50 b)	·	
	TE 701		82	Street Add	ress (P.O. Box Number is Not Acceptab	e)	
	SBURG FL 34748		83			· · · · · · · · · · · · · · · · · · ·	
-	0001101201110						
			84	City		FL 85 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, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NOTE:	flegistored Age	nt signature requi	red when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	ST	DELETE				Change	
NAME	TUTOR, DEBBIE		1.2 NAME				
STREET ADDRESS	2280 TALLY ROAD		1.B STREFT	ADDRESS			
CITY-ST-ZIP			1.4 CITY - S	I - 71P			
TITLE	DP DELETE		2.1 TillE			Change Addition	
NAME	TUTOR, GARY JAMES		2 P NAME				
STREET ADDRESS	2280 TALLY ROAD		2.B STREET	ADDRESS			
CITY-ST-ZIP	LEESBURG FL		2. 4 CiTY - 9	S1 - ZIP			
TITLE	☐ DELETE		3.4 11116			Change Addition	
NAME			3.2 NAME				
STREET ADDRESS	1		3.B STREFT			·	
CITY-ST-ZIP	T becare		3.4. CITY - 5	ST-ZIP		[][[][][][][][][][][][][][][][][][][][][
TITLE	☐ DELETE		4.1 1111.6			☐ Change ☐ Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.8 STREET				
CITY-ST-ZIP	DELETE		4.4 City - S	T-21P	[A] 100		
TITLE	DELFTE		5.4 TITLE			Change Addition	
NAME			5.P NAME				
STREET ADDRESS			5.8 STREET				
CITY-ST-ZIP				1 · 2(P		Change 1 4429	
TITLE		☐ DELETÉ	6.4 TITLE			Change Addition	
NAME			6.P NAME				
STREET ADDRESS	1.00		6.8 STREET			l	
CITY-ST-ZIP	l		6.4 CITY - S	1- ZIP			

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 supplience tal 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.