FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L00644** **(9)**

1. Corporation Name

PAGE BUILDING SYSTEMS CORPORATION

Principal Place of Business	Mailing Address
157 TEQUESTA DRIVE P.O. BOX 106 MERRITT ISLAND FL 32952 US	POST OFFICE BOX 372070 SATELLITE BEACH FL 32937-2070 US

3. Date Incorporated or Qualified: 06/30/1989

3a. Date of Last Report: 05/22/1995

2. Principal Place of Business	2a. Mailing Address
21 Address: 1127 S.Patrick Dr.,#27	26 Address: P.O.Box 372070
22 Suite, Apt. #, etc.: Suite #27	27 Suite, Apt. #, etc.: N/A
23 City & State: Satellite Bch.,Florida	28 City & State: Satellite Bch.,Florida
24 Zip: 32937-2070 25 Country: U.S.A.	29 Zip: 32937-2070 30 Country: U.S.A.

4. FEI Number: 65-0139091 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: XX **$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 XX Yes ☐ No

9. Name and Address of Current Registered Agent

PAGE, THOMAS R
157 TEQUESTA DRIVE
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

81 Name: Thomas R. Page
82 Street Address (P.O. Box Number is Not Acceptable): 157 Tequesta Harbor Drive
83
84 City: Merritt Island, FL 85 Zip Code: 32952

11. Pursuant to the provisions of Section 607.0505 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: THOMAS R. PAGE DATE: June 10, 1996

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CPS	☐ DELETE	11 TITLE	CPS	XX Change ☐ Addition
NAME	PAGE, THOMAS R.		12 NAME	PAGE, THOMAS R.	
STREET ADDRESS	539 SOUND DRIVE		13 STREET ADDRESS	157 TEQUESTA HARBOR DRIVE	
CITY-ST-ZIP	KEY LARGO FL		14 CITY-ST-ZIP	MERRITT ISLAND, FLORIDA 32952	
TITLE	DVT	☐ DELETE	21 TITLE	DVT	XX Change ☐ Addition
NAME	PAGE, JO ANNE		22 NAME	PAGE, JO ANNE	
STREET ADDRESS	539 SOUND DRIVE		23 STREET ADDRESS	157 TEQUESTA HARBOR DRIVE	
CITY-ST-ZIP	KEY LARGO FL		24 CITY-ST-ZIP	MERRITT ISLAND, FLORIDA 32952	
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	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: THOMAS R. PAGE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: June 10, 1996

Daytime Phone: (407) 773-2007

CR2E034 (12/95)