

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

FILED  
Oct 16 1998 8:00am  
Secretary of State

FRONT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # L27313 (0)  
1. Corporation Name  
ARCHITECTURAL METAL SYSTEMS, INC.



Principal Place of Business

% JOHN V BAUM  
111 S MAITLAND AVE  
MAITLAND FL 32751

Mailing Address

% JOHN V BAUM  
111 S MAITLAND AVE  
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 4881 Distribution Ct  
Suite, Apt. #, etc.

22 City & State

23 Orlando, FL

24 32822 25 Orange

2a. Mailing Address

26 4881 Distribution Ct  
Suite, Apt. #, etc.

27 City & State

28 Orlando, FL

29 32822 30 Orange

3. Date Incorporated or Qualified

10/20/1989

4. FEI Number

59-2975455

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BAUM, JOHN V.  
111 S MAITLAND AVE  
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name X Terry Davis

82 Street Address (P.O. Box Number is Not Acceptable)  
4881 Distribution Court

83

84 City Orlando

FL

85 Zip Code 32822

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. Each 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 duties imposed by Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME DAVIS, TERRY M  
STREET ADDRESS 4881 DISTRIBUTION CT  
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE V  
NAME DAVIS, DAVID E  
STREET ADDRESS 4881 DISTRIBUTION CT.  
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 or authorized 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 to this report.

CR2E034 (10/97)