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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name M88190

(7)

ANDERSON SHUTTER CO., INC.

FILED Apr 16 1998 8:00am Secretary of State

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Principal Place	ling Address					I TOBLOBELLION ERIEN HERE HERE ERIN BOTH BIBLE BERT BIRLE BERT BIRLE BERLY BIRLE BIRLE						
1470 RAILHEA	ID BLVD.	147	1470 RAILHEAD BLVD.									
NAPLES FL 33963			NAPLES FL 33963					DO 107 110175 11 7110 00 105				
US		US	US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
İ								-				
9 Principal P	lace of Business	20.	Mailing Address	.					07/01/1988 FEI Number			applied For
21	dec of Edsirioss	26	 					65-0096296				lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					C0 7E Audit				
22		27						5.	Certificate of Status Desired		7	Required
City & State	9		City & State					A	Election Campaign Financing			May Be
23		28							Trust Fund Contribution			I to Fees
Zip	Country		Ζıρ	Co	untry	7		8.	This corporation owes or has pa	aid the cu	rrent year Ir	ntangible
24	25	29		30					Personal Property Tax due June			□ No
9. Name and Address of Current Registered Agent								10.	Name and Address of New Re	gistered	Agent	
RU:	SSELL, ANDERSON				81	Na	ame					
	29 RIVER ROYAL CT		i a			St	treet Address	s (P.	O. Box Number is Not Acceptal	ole)		
	NITA SPRINGS FL 34135					ľ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		o, box (tamber is thet / loospital	3,0,		
					83				•	, ,		
					84	Ci	ity			FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 60	7.1508. Florida Statu	tes, the s	above	e-na	med corpora	ation	submits this statement for the i	numase r	f changing	its registered
office or ragent I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida igations of	s. Such change was Section 607.0505, Fl	authoriza Iorida Sta	ed by	y the s.	e corporation	's bo	pard of directors. I hereby acce	pt the ap	pointment a	s registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if	applicable (NO	TE: Register	ed Age	eni sig	gnature required v	when r	einstating)	DATE		
12.	OFFICERS A		··	13.					DDITIONS/CHANGES TO OFFI		D DIRECTO	RS IN 12
TITLE	PD		DELETE		ITLE						☐ Change	
NAME	RUSSELL, ANDERSON			1,21	MAME							
STREET ADDRESS	27229 RIVER ROYALE COU	RT		1.3.9	STREET	ADDE	RESS					
CITY-ST-ZIP	BONITA SPRINGS FL	•••			CITY-S							
TITLE	D		☐ DELETE	2.11					4.		Change	Addition
NAME	CHRISTINE, ANDERSON			2.21	NAME							
STREET ADDRESS	27229 RIVER ROYALE COU	RT		235	STREET	ADDF	RESS					
CITY-ST-ZIP	BONITA SPRINGS FL			2.4	CITY - S	ST-ZII	P					
TITLE			DELETE 3.1 T								Change	Addition
NAME				3.21	NAME						,	
STREET ADDRESS				1	STREET	ADDR	RESS					
CITY-ST-ZIP												
TITLE				3.4. CITY+ST-ZIP			_				☐ Change	Addition
NAME					NAME						• • •	***
STREET ADDRESS					STREET	ADDR	RESS					
CITY-ST-ZIP					CITY-S							
TITLE		· · · · · ·	DELETE	5.11		76 - EN	<u> </u>				Change	Addition
NAME			_		MAME						V	_
STREET ADDRESS					STREET	AUDE	Btcc }					}
CITY-ST-ZIP					SINCE SITY-S		t t					
TITLE			DELETE	6.1 7		11-616					Change	Addition
NAME			- PULLUE								— Anenige	Addition
					NAME							
STREET ADORESS					TREET							1
CITY-ST-ZIP				■ 6.40	CITY S	T-ZIP	?					

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 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 exerporation of the exercise report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted or of an attachment with an address.

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