

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

FILED

May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P14793 (4)					
1. Corporation Name FLOUR CITY ARCHITECTURAL METALS, INC.					
Principal Place of Business 175 SEA CLIFF AVE. GLEN COVE NY 11542			Mailing Address 175 SEA CLIFF AVE. GLEN COVE NY 11542-4189		



2. Principal Place of Business 21 915 Riverview Drive Suite, Apt. #, etc. 22 SUITE 1 City & State 23 Johnson City, TN Zip 24 37601		2a. Mailing Address 26 915 Riverview Drive Suite, Apt. #, etc. 27 SUITE 1 City & State 28 Johnson City, TN Zip 29 37601		3. Date Incorporated or Qualified 06/10/1987		3a. Date of Last Report 04/12/1996	
				4. FEI Number 25-1468221		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 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				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 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	AT ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SMITH, PAUL L.	1.2 NAME	
STREET ADDRESS	ONE OXFORD CENTRE, 301 GRANT STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURGH PA	1.4 CITY-ST-ZIP	
TITLE	P ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	RUSO, MICHAEL J	2.2 NAME	Michael J. Russo
STREET ADDRESS	301 GRANT ST ONE OXFORD CENTRE	2.3 STREET ADDRESS	915 Riverview Drive
CITY-ST-ZIP	PITTSBURGH PA 15	2.4 CITY-ST-ZIP	Johnson City, TN 37601
TITLE	VASD ☒ DELETE	3.1 TITLE	S ☐ Change ☒ Addition
NAME	HILDRETH, GARY R	3.2 NAME	John W.Y. Tang
STREET ADDRESS	ONE OXFORD CENTRE	3.3 STREET ADDRESS	610 Nathan Road, Suite 1301
CITY-ST-ZIP	PITTSBURGH PA 15	3.4 CITY-ST-ZIP	Mongkok, Kowloon, Hong Kong
TITLE	SD ☒ DELETE	4.1 TITLE	T ☐ Change ☒ Addition
NAME	HERNANDEZ, CARLOS	4.2 NAME	Bryan R. Willis
STREET ADDRESS	ONE OXFORD CENTRE	4.3 STREET ADDRESS	915 Riverview Drive
CITY-ST-ZIP	PITTSBURGH PA	4.4 CITY-ST-ZIP	Johnson City, TN 37601
TITLE	VPD ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	COREY, JOHN B	5.2 NAME	
STREET ADDRESS	301 GRANT ST ONE OXFORD CENTRE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURGH PA 15	5.4 CITY-ST-ZIP	
TITLE	AS ☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	SNEE, TIMOTHY	6.2 NAME	
STREET ADDRESS	175 SEA CLIFF AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	GLEN COVE NY 11542	6.4 CITY-ST-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 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:  **Bryan R. Willis** 4/25/97 (423) 928-2724

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0008908

CR2E034 (9/96)