

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

FILED

98 MAY 12 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P15566

1. Corporation Name

Guardian Fiberglass Service Corporation

Principal Place of Business

2300 Harmon Road

Auburn Hills, MI 48326-1714

Mailing Address

2300 Harmon Road

Auburn Hills, MI 48326-1714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/12/1987

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

38-2753020

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

City & State

23

City & State

28

Zip

Country

24

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System

1200 S. Pine Island Road

Plantation, FL 33324

81

Name NationsCorp Registered Agents, Inc.

82

Street Address (P.O. Box Number is Not Acceptable)

526 E. Park Ave.

83

City Tallahassee,

FL

86

Zip Code 32301

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

Alan L. Schlang

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 PD
NAME Faulkner, Duane
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

TITLE V
NAME Knight, Jeffrey A.
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

TITLE V
NAME Marshall, Robert
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

TITLE S
NAME Schlang, Alan L.
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

TITLE T
NAME Clark, David A.
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

TITLE D
NAME Davidson, William
STREET ADDRESS 2300 Harmon Road
CITY - ST - ZIP Auburn Hills, MI 48326 ☐ DELETE

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

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

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - 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 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: *Alan L. Schlang*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN L. SCHLANG

Date

4/14/98

(248) 340-2272

Daytime Phone #