

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

FILED

Jan 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000004250

1. Corporation Name

FLORI-DOOR, INC.

Principal Place of Business

Mailing Address

4460 N. GOLDENROD RD.
BLD. # 102
WINTER PARK, FL. 32792

SAME

3. Date Incorporated or Qualified
11-5-92

3a. Date of Last Report
1996

2. Principal Place of Business
21 4460 N. GOLDENROD RD.

2a. Mailing Address
26 4460 N. GOLDENROD RD.

4. FEI Number
59-315-4052

Applied For
Not Applicable

22 #102

27 #102

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

23 WINTER PARK, FL.

28 WINTER PARK, FL.

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 32792

25 USA

29 32792

30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DELETE OLD AGENT - RANDY MARSHALL,
ATTY.

81 Name W. Eli deLhorbe

82 Street Address (P.O. Box Number is Not Acceptable)
1600 OAKHURST AVE.

83

84 City WINTER PARK

FL

85 Zip Code 32789

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. This statement will bind and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: W. Eli deLhorbe W. Eli deLhorbe, PRES. JAN 9, 1997

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	P/V/S/T/C	☒ DELETE
2. STREET ADDRESS	SAUDRA C. JARRETT	
3. CITY - ST - ZIP	3580 S. HWY 17-92 CASSELBERRY FL. 32707	
4. NAME		☐ DELETE
5. STREET ADDRESS		
6. CITY - ST - ZIP		
7. NAME		☐ DELETE
8. STREET ADDRESS		
9. CITY - ST - ZIP		
10. NAME		☐ DELETE
11. STREET ADDRESS		
12. CITY - ST - ZIP		
13. NAME		☐ DELETE
14. STREET ADDRESS		
15. CITY - ST - ZIP		

1.1 TITLE	P/S/C	☒ Change ☐ Addition
1.2 NAME	W. Eli deLhorbe	
1.3 STREET ADDRESS	1600 OAKHURST AVE.	
1.4 CITY - ST - ZIP	WINTER PARK, FL. 32789	
2.1 TITLE	V/T/D	☒ Change ☐ Addition
2.2 NAME	JAMES K. BRACKIN, JR.	
2.3 STREET ADDRESS	695 SAN PABLO	
2.4 CITY - ST - ZIP	CASSELBERRY, FL. 32707	
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 declare by certifying 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 included 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 on Back 12 or Back 13 if changed, or on an attachment with an address.

SIGNATURE: W. Eli deLhorbe, PRES.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. Eli deLhorbe
1/9/97

Date

800-245-5303
Daytime Phone

CR2E034 (9/96)