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Mar 05 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 # P93000009834 (1)

1. Corporation Name

NOVA CARPENTRY, INC.

Principal Place of Business

1105 LADY GUINEVERE DRIVE  
VALRICO FL 33594

Mailing Address

P.O. BOX 2771  
BRANDON FL 33509-2771  
US



3. Date Incorporated or Qualified

02/01/1993

3a. Date of Last Report

03/26/1996

4. FEI Number

65-0388575

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

2. Principal Place of Business

21 10825 Tom Folsom Road

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite A

27 City & State

23 Thonotosassa, Fl.

28 City & State

24 33592-3456

Country

25 US

29 Zip

Country

30

9. Name and Address of Current Registered Agent

NYMARK, DENNIS V  
137 SOUTH PEBBLE BEACH BLVD.  
SUITE 201  
SUN CITY CENTER FL 33573

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

TITLE PSTD  
NAME MACDONALD, HUGH  
STREET ADDRESS 1105 LADY GUINEVERE DRIVE  
CITY-ST-ZIP VALRICO FL 33594

TITLE V  
NAME MACDONALD III, HUGH  
STREET ADDRESS 1105 LADY GUINEVERE DRIVE  
CITY-ST-ZIP VALRICO FL 33594

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 10825 Tom Folsom Rd, Ste. A  
1.4 CITY-ST-ZIP Thonotosassa, Fl. 33592-3456

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 10825 Tom Folsom Rd, Ste. A  
2.4 CITY-ST-ZIP Thonotosassa, Fl. 33592-3456

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

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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: *Ruth Macdonald*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Hugh Macdonald*

2/28/97

813/986-4968

CR2E034 (9/96)