

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
CONYIA & COMPANY, ATTORNEYS

APPROVED
AND
FILED

APPROVED
AND
FILED

DOCUMENT # P93000039753 (7)

To: Corporation Name

SKI'S QUALITY EXTERIORS, INC.

95 MAY -1 AM 5:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1025 BLANKENSHIP RD
DOVER FL 33527

1025 BLANKENSHIP RD
DOVER FL 33527

DO NOT WRITE IN THIS SPACE

3. Date incorporated or organized

06/01/1993

38. Date of Last Report

04/04/1994

2. Principal Place of Business

26. Mailing Address

21

26

4. FCI Number

59-3184302

Applied For

Not Applicable

22. State Agent

27. State Agent

22

27

5. Certificate of Status (Amount)

☐

\$8.75 Additional
Fee Required

23. City & State

28. City & State

23

28

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for attorney fees under S. 119.032
Florida Statute ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KURCZEWSKI, JOYCE D
1025 BLANKENSHIP RD
DOVER FL 33527

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 190.01 and 190.02, Florida Statutes, the above named corporation submits this statement for the purpose of checking its registered office on the previous report filed in the State of Florida. Such change was authorized by this corporation's board of directors. I hereby accept this statement as required report. I am familiar with and believe the information has been obtained from Florida Statutes.

SIGNATURE

Signature of the person filing this report

Signature of the person filing this report

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

14. Name

DPST
KURCZEWSKI, JOYCE D
1025 BLANKENSHIP RD
DOVER FL 33527

15. Name

16. Name

17. Name

18. Name

19. Name

20. Name

21. Name

22. Name

23. Name

24. Name

25. Name

26. Name

27. Name

28. Name

29. Name

30. Name

31. Name

32. Name

33. Name

34. Name

35. Name

36. Name

37. Name

38. Name

39. Name

40. Name

41. Name

42. Name

43. Name

44. Name

45. Name

46. Name

SIGNATURE: *Joyce D Kurczewski* Joyce D Kurczewski 5-1-95

813-737

2588

0286485 CP

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Teresa B. Murrain
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

DOCUMENT # **P93000039969 (9)**

1. Corporation Name

DE MORGAN PROPERTIES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**1001 NORTH U.S. HIGHWAY ONE
SUITE 601
JUPITER FL 33477**

Mailing Address

**1001 NORTH U.S. HIGHWAY ONE
SUITE 601
JUPITER FL 33477**

DO NOT WRITE IN THIS SPACE

3. Date First Registered or Received
05/28/1993

3a. Date of Last Report
06/20/1994

4. FFI Number
65-0457344

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. State Apt. # etc.

2a. Mailing Address

26. State Apt. # etc.

23. City & State

27. City & State

24. Zip Country

28. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BARWICK, ROBERT D
1001 NORTH U.S. HIGHWAY ONE
SUITE 601
JUPITER FL 33477**

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 672.05(2) and 672.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, in full, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 672.05(2) and 672.15(8), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of Registered Agent or Director

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME PD
BARWICK, ROBERT D.
1001 N. US HWY. ONE, #601
JUPITER FL

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

CHAIRMAN/President/Secretary Change ☐ Addition

NAME VPFT
WILLS, TRACEY M.
1001 N. US HWY. ONE, #601
JUPITER FL

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

Change ☐ Addition

NAME AS
MONTROYA, MARY E.
1001 N. US HWY. ONE, #601
JUPITER FL

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

Delete Change ☒ Addition

NAME
1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

**Executive Vice President
William J. CARTER
1001 N US HWY. ONE #601
JUPITER FL 33477** Change ☐ Addition

NAME
1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

Change ☐ Addition

NAME
1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

1. NAME
2. STREET ADDRESS
3. CITY & STATE
4. ZIP

Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not equally for the corporation stated in Sections 672.05(2) and 672.15(8), Florida Statutes. I further certify that the information is true and correct. The annual report or supplemental annual report is true and correct and that my signature shall have the same effect as the signature of the officer or director. I am familiar with and accept the obligations of Sections 672.05(2) and 672.15(8), Florida Statutes, and that my signature shall have the same effect as the signature of the officer or director.

SIGNATURE:

Tracey M Wills
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-95

407/747-0880