FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 MAY -1 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000042005 (7)

1. Corporation Name

W.D. FIBERGLASS, INC.

Principal Place of Business: 109 LAKE ROAD, TAVERNIER FL 33070

Mailing Address: 109 LAKE ROAD, TAVERNIER FL 33070

3. Date Incorporated or Qualified: 06/09/1993

3a. Date of Last Report: 08/03/1994

4. FEI Number: NOT APPLICABLE — 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: 21 148 MARINE AVE; 22 Suite, Apt. # etc.: ; 23 City & State: TAVERNIER FL; 24 Zip: 33070; 25 Country:

2a. Mailing Address: 26 148 MARINE AVE; 27 Suite, Apt. # etc.: ; 28 City & State: TAVERNIER FL; 29 Zip: 33070; 30 Country:

9. Name and Address of Current Registered Agent

DIAMOND, WILLIAM A
109 LAKE ROAD
TAVERNIER FL 33070

10. Name and Address of New Registered Agent

81 Name: MICHAEL P. WYNN
82 Street Address (P.O. Box Number is Not Acceptable): 148 MARINE AVE
83
84 City: TAVERNIER 85 FL Zip Code: 33070

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: MICHAEL P. WYNN *Michael P. Wynn*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	TITLE	☒ Change ☐ Addition
NAME	DIAMOND, WILLIAM A	NAME	NO LONGER AN
STREET ADDRESS	109 LAKE ROAD	STREET ADDRESS	OFFICER
CITY-ST-ZIP	TAVERNIER FL 33070	CITY-ST-ZIP	
TITLE	D	TITLE	P/VP/S/T ☒ Change ☐ Addition
NAME	WYNN, MICHAEL P	NAME	MICHAEL P. WYNN
STREET ADDRESS	87401 OVERSEAS HIGHWAY	STREET ADDRESS	148 MARINE AVE.
CITY-ST-ZIP	ISLAMORADA FL 33036	CITY-ST-ZIP	TAVERNIER FL 33070
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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: *Michael P. Wynn* MICHAEL P. WYNN 4-30-95 (305-664-1588)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0119785 CP