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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000067854 (8)

WINDOWS TO THE WATER, INC.

						<u> </u>
Principal Place of Business Mailing Address						
2100 SW 34TH GAINESVILLE US		2100 SW 34TH ST Gainesville FL 32608- US	1204		• Pate leaves and a Coulified	O Direction December
					3. Date Incorporated or Qualified 09/23/1993	3a. Date of Last Report 04/17/1996
2. Principal Place of Business 2a. Mailing Address				H-1-2-7-	4, FEI Number	Applied For
21 26 Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.	o Apt # ata		59-3203426	Not Applicable
22		27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 11.01	Country	у	8. This corporation has liability for	
24	24 25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes 10. Name and Address of New Re	Yes No
				Name	10, nume una Audioss of flow flo	gistored Agent
ZAFFKE, MATIAS 2304 SW 112 ST		•	82 Street Addre		dress (P.O. Box Number is Not Acceptate	
	NESVILLE FL 32607				idiess (F.O. Box Number is Not Acceptat	ne,
			83	· ·		
			84	City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the St	502 and 607.1508, Florida State ate of Florida. Such change was	ules, the above authorized b	re-named co y the corpor	orporation submits this statement for the pration's board of directors. I hereby acce	
1	m familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statute	s.		,,
SIGNATURE	Signature, typed or printed name of registered	agent and fit oilf applicable (NC	D1f : Registered Ag	ent signature rec	quired when reinstating)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	DP	∟ DELE1€	1.1 TITLE			☐ Change ☐ Addition
NAME	ZAFFKE, MATIAS 2304 SW 112 ST		1.2 NAME		•	
STREET ADDRESS CITY-ST-ZIP	GAINESVILLE FL		1.3 STREE	1 ADDRESS		
TITLE			2.1 TITLE	31-211		Change Addition
NAME	The desire of the same of the		2.2 NAME			
STREET ADDRESS	2304 SW 112 ST		23 STREE	T ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	I bevet	2 4 CITY-	ST-ZIP		[] Ob [] 1227124
THILE	S Zaf fke, aubrey D	L] DELETE	3.1 TITLE 3.2 NAME		19	Change Addition
NAME STREET ADDRESS	2304 SW 112TH ST			I ADORESS		
CITY-ST-ZIP	GAINESVILLE FL		3.4. CITY-)		
TITLE		☐ DELETE	4.1 1171.6			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS	1.		4.3 STHEE	T AUDRESS	•	
CITY-ST-ZIP		DOLLC	4.4 CITY-S	ST-ZIP		Change Addition
TITLE NAME	- N		5.1 TITLE 5.2 NAME	-		Cuange C Acquion
STREET ADDRESS				I ADDRESS		
CITY-ST-ZIP			5.4 CITY-5			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET	I ADDRESS		
CITY-ST-ZIP			6.4 D(TY+S	ST - Z)P		

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 Statules. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNIATURE.

Parcelli Parkether

4-11-9

352-336-6303

FILED

Apr 21 1997 8:00am

Secretary of State