

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000050502

FILED  
Feb 12, 2002 8:00 AM  
Secretary of State

Entity Name: ARCHITECTURAL PANEL PRODUCTS, INC.

**Current Principal Place of Business:**

1175 N.W. 17TH AVENUE  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

1175 N.W. 17TH AVENUE  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

FEI Number: 65-0505264      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DARR, ROBERT  
1175 N.W. 17TH AVENUE  
DELRAY BEACH, FL 33445 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DARR, ROBERT  
Address: 901 BERMUDA GARDENS RD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: HOFER, GERLINDE  
Address: 901 BERMUDA GARDENS RD  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DARR, ROBERT  
Address: 902 N.E. 7 STREET  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W. DARR

PRES

02/12/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date