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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Scoretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000056499** (4)

GREATER BAY DOORS, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



3680 66TH AVE. NORTH PINELLAS PARK FL 34665			3680 66TH AVE. NORTH PINELLAS PARK FL 33781-6124							
						3. Date Incorporated or Qualified 07/29/1994	3a. Date of L			
2. Principal F	Place of Business	2a. Mailing Addr	2a. Mailing Address			4. FEI Number	1	Applied Fo	or	
21		26	26			59-3265208		Not Applic	able	
Sulte, Apt.	. #, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Sta	te	City & State	City & State			6. Election Campaign Financing	\$2	.00 May Be		
23 Zip	Country	28	Zip Country			Trust Fund Contribution	Added to Fees			
24	25	}	-			· · · · · · · · · · · · · · · · · · ·	r intangible tax under s. 199.032,			
24]	25 29 30 9. Name and Address of Current Registered Agent			الر		10, Name and Address of New Registered Agent				
BEACH, JAMES D					81 Namo					
424	CENTRAL AVENUE					Address (P.O. Box Number is Not Acceptable)				
	TE 702 PETERSBURG FL 33701					`	<u>, </u>			
				84	City		loe I	7in Codo		
					,		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 register	ed agent and title if appreable	(NOTE: R	legistered Age	ent signature requ	uired when reinstating)	DATE	······································		
12.				13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD DELETE		LETE	1.1 TALE			☐ Ch	ange 🛄 Add	dition §	
NAME	WILEY, JEFFREY L	MARTI	1.2 N						2	
STREET ADDRESS	1918 COUNTRY CLUB RD.		. H 1.3 S		ADDRESS				يا	
CITY-ST-ZIP	ST. PETERSBURG FL 3371				T-7IP		·····		§	
TITLE	VID	[_] Dt	DELETE 2.1 TI				∐ Ch	ange Add	dilion	
NAME	JOHNSON, CALVIN D		2.2 h							
STREET ADDRESS	139 WALL STREET	700			ADDRESS					
CITY-ST-ZIP	REDINGTON BEACH FL 33	CONTRACT CONTRACTOR CO	(116	2. 4 CITY-ST-7IP					100	
TITLE	SO DELETE			31 THTLE			∐ Ch	ange 📖 Add	Jilion	
NAME	SCHELL, FREDERICK J 4285 LAGO WAY			3.2 NAMÉ						
STREET ADDRESS	SARASOTA FL 34241			3.3 \$1REE1 ADDRESS						
CITY-ST-ZIP TITLE				3.4. CITY - ! 4.1 TITLE	51 - ZIP		Ch	ongo D Adi	dilion	
NAME			CL IL					ange L Adi	JIROH	
STREET ADDRESS				4. 2 NAME	4DDDCCC					
CITY-ST-ZIP				4.9 \$18EE1						
TITLE		DE DE	LETE	4.4 CITY - S 5.1 THEF	1 - 71P		☐ Ch	ange 🔲 Add	dition	
NAME	in the second			5.2 NAME		•		ango tilina	anton	
STREET ADDRESS				5.7 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY - S						
TITLE		DE	LETE	6.1 TITLE	0 - 411		☐ Ch	ange 🔲 Ado	dition	
NAME			6.2 N					السيط تهيد		
STREET ADDRESS				ì	ADDRESS					
CITY-ST-ZIP	,			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP						
J111-01-EIT .	 			0.4 (111 - 8	o - zar					

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 angular 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 of businessempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or proper an attacky tent with an address.