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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400091487

-- ACCO BUILDING PRODUCTS, INC.-

ACCO AERATED CONCRETE SYSTEMS, INC.

Principal Place of Business

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90046 034 ***150.00



1616 SOUTH 14TH STREET LEESBURG FL 34748		1616 SOUTH 14TH STREET LEESBURG FL 34748		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 12/15/1994		,
O Data de et Di		2a. Mailing Address		-	12/13/1994 4. FEI Number	$\neg \Box$	Applied For
2. Principal Place of Business		├		ļ '= '	H	Not Applicable	
21)		Suite, Apt. #, etc.			59-3284329 Not Applica \$8.75 Additiona		
Suite, Apt. #, etc.		27			5. Certificate of Status Desired	+	Required
City & State	9	City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Into	angible	
24	25	29 3	0		Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent _	
			81	Name	GREGG F. BROWNE		
	WNE, GREGO F:	CORRECTION			Address (P.O. Bok Number is Not Acceptable)		J
1616 S 14TH STREET							
LEESBURG FL 34748			83				
			84	City		85 2	Zip Code
				·	 	<u>. </u>	
office or r	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auti	honzed by	the corbo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appole	changing ntment a	s registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Re	egistered Agen	t signature n	equired when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	CTORS IN 12
TITLE	CPD	☐ DELETE	1.1 TITLE		CD	Char	nge X Addition
NAME	BROWNE, GREGG F.		1.2 NAME		GREGG, F. BROWNE		
STREET ADDRESS	1616 SO. 14TH ST		1.3 STREET	ADDRESS	4.02 44), (0.00		
CITY-ST-ZIP	LEESBURG FL		1.4 CITY-S1	-ZIP	34748		
TITLE	S	□.DELETE	2.1 TITLE			☐ Char	nge 💢 Addition
NAME	DARNELL, W R		2.2 NAME				
STREET ADDRESS	1616 SO. 14TH ST		2.3 STREET	ADDRESS			į
CITY-ST-ZIP	LEESBURG FL		2. 4 CITY-S	T-ZiP	34748		
TITLE	T	☐ DELETE	3.1 TTTLE			☐ Char	nge 🔀 Addition
NAME	JONES, GARY L		3.2 NAME				
STREET ADDRESS	1616 S 14TH STREET		3.3 STREET	ADDRESS			
CITY-ST-ZIP	LEESBURG FL		3.4. C/TY-S	T- ZIP	34748		
TITLE	V	☐ DELETE	4,1 TITLE			☐ Char	nge 💢 Addition
NAME	SIMPSON, III S RANDOLPH		4. 2 NAME				-
STREET ADDRESS	1616 S 14TH STREET	-	4.3 STREET	ADDRESS			
CITY-ST-ZIP	LEESBURG FL		4.4 CITY-S	r-ZIP	34748		
TITLE	-	☐ DELETE	5.1 TITLE		(<i>D</i>	Char	nge Addition
NAME	LUNDERS FADT		5.2 NAME		LUNDERSTADT, CARL H 1616 SOUTH 14TH STREET	÷	(
STREET ADDRESS	,		5.3 STREET	ADDRESS		F	
CITY-ST-ZIP			5.4 CITY-ST	r-ZIP	LEEBBURG, FL 34748		
TITLE	M84 .	☐ DELETE	6.1 TITLE		1 3 2	☐ Char	nge Addition
NAME			6.2 NAME		RUSSI, DWIGHT L.		
STREET ADDRESS			6.3 STREET	ADDRESS	1616 5.147H 5T		
			I		I AMERICA A PORT SHOTHING		

14. I 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 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, with all other like empowered.