

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000001780 (2)

1. Corporation Name

SOUTHEAST WALLS, INC.



Principal Place of Business

235 WEST DRIVE  
MELBOURNE FL 32904

Mailing Address

235 WEST DRIVE  
MELBOURNE FL 32904

3. Date Incorporated or Qualified

01/05/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-3286714

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

9. Name and Address of Current Registered Agent

MORRIS, JOSEPH R  
235 WEST DRIVE  
MELBOURNE FL 32904

10. Name and Address of New Registered Agent

81

Name

Joseph R. MORRIS

82

Street Address (P.O. Box Number is Not Acceptable)

541 FIEDLER ST. NE

83

84

City

PALM BAY

FL

85

Zip Code

32907

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

Joseph R. Morris

(If not a Registered Agent, signature required when terminating)

6/4/96

(Date)

12. OFFICERS AND DIRECTORS

TITLE

D

MORRIS, JOSEPH R  
235 WEST DRIVE  
MELBOURNE FL 32904

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

D

MORRIS, JOSEPH R  
235 WEST DRIVE  
MELBOURNE FL 32904

☒ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

D

MORRIS, JAMES F  
235 WEST DRIVE  
MELBOURNE FL 32904

☒ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT

☒ Change ☐ Addition

1.2 NAME

JOSEPH R. MORRIS

1.3 STREET ADDRESS

541 FIEDLER ST. NE

1.4 CITY-ST-ZIP

PALM BAY, FL 32907

2.1 TITLE

VICE PRESIDENT

☐ Change ☒ Addition

2.2 NAME

THOMAS R. MORRIS

2.3 STREET ADDRESS

902 PEMBROKE AVE NE

2.4 CITY-ST-ZIP

PALM BAY, FL 32907

3.1 TITLE

SECRETARY

☐ Change ☒ Addition

3.2 NAME

JOHN F. MORRIS

3.3 STREET ADDRESS

561 RAMER ST. NE

3.4 CITY-ST-ZIP

PALM BAY, FL 32907

4.1 TITLE

TREASURER

☐ Change ☒ Addition

4.2 NAME

GLORIA MORRIS

4.3 STREET ADDRESS

142 CLAIR BOWNE AVE.

4.4 CITY-ST-ZIP

SATELITE BLVD, FL 32907

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(k), 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:

Joseph R. Morris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/4/96

Date

Daytime Phone #

CR2E034 (12/95)