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FILED

Mar 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000010048 (3)

1. Corporation Name  
NORTH AMERICAN SUNROOF PARTNERS, INC.



Principal Place of Business

3200 BAILEY LN #197  
NAPLES FL 33942

Mailing Address

6004 WESTSIDE SAGINAW RD  
BAY CITY MI 48706-9357  
US

3. Date Incorporated or Qualified

02/03/1995

3a. Date of Last Report

03/19/1996

4. FEI Number

65-0557260

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

2. Principal Place of Business

21 10577 Rocket Blvd

22 Suite Apt. #, etc.  
Unit D

23 City & State  
Orlando FL

24 Zip  
32824

25 Country

2a. Mailing Address

26 Suite Apt. #, etc.

27 City & State

28 Zip

29 Country

30 Country

9. Name and Address of Current Registered Agent

SEWARD, TIMOTHY R  
3200 BAILEY LN #197  
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name Timothy P. Seward  
82 Street Address (P.O. Box Number is Not Acceptable)  
6017 Pine Ridge Rd #248  
83  
84 City Naples FL 85 Zip Code 34119

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 *Shanna Christen*

*Treasurer*

2-28-97

Signature of person for printed name of registered agent and chief officer

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	SEWARD, TIMOTHY P	
STREET ADDRESS	3200 BAILEY LN #197	
CITY- ST- ZIP	NAPLES FL 33942	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARMONA, SCOTT L	
STREET ADDRESS	6004 WESTSIDE SAGINAW RD	
CITY- ST- ZIP	BAY CITY MI 48706	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	6017 Pine Ridge Rd #248
14 CITY- ST- ZIP	Naples FL 34119
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

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 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 or Block 14 or on an attachment with an address.

SIGNATURE: *Shanna Christen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/97 (577) 684-6128  
Date Daytime Phone #

CR2E034 (9/96)