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PROFIT CORPORATION **ANNUAL REPORT** · 1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000024541 (1)

EXTERIOR CONSULTANTS, INC.

* * *	
Principal Place of Business	Mailing Address
8107 NW 47TH STREET	8107 NW 47TH STREET

FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1995 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 65-0578707 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PITTMAN, LARRY 6338 PREISIDENTIAL CT 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 102 63 FT MYERS FL 33919 84 City Zip Code 502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered also of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered algorithms of, Section 607.0505, Florida Statutes. 11. Pursuant to the provision SIGNATURE (NOTE: Registered Agent signature required when reinstating) ou agric and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE PITTMAN, LARRY L 1.2 NAME NAME 6338 PRESIDENTIAL CT #102 1.3 STREET ADDRESS STREET ADDRESS FT MYERS FL 33919 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 T⊦TL€ Change ___ Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP 0000025023**2** -04/28/38--01027--006 DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS ***150.00 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with his 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 experimental onnual reports 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 required to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an alternative with an address.