

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Mar 10 1997 8:00am  
Secretary of State

DOCUMENT # **P95000026380 (2)**

1. Corporation Name

**LEE & CATES KINGS BAY GLASS, INC.**



Principal Place of Business

Mailing Address

**142 MADISON ST  
JACKSONVILLE FL 32204**

**142 MADISON ST  
JACKSONVILLE FL 32204-1618**

3. Date Incorporated or Qualified

**04/01/1995**

3a. Date of Last Report

**04/28/1996**

2. Principal Place of Business

2a. Mailing Address

**21**  
Suite, Apt. #, etc.

**26**  
Suite, Apt. #, etc.

**22**  
City & State

**27**  
City & State

**23**  
Zip Country

**28**  
Zip Country

**24**  
Country

**29**  
Country

4. FEI Number

**59-3309574**

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

10. Name and Address of New Registered Agent

**LEE, THOMAS D III  
142 MADISON STREET  
JACKSONVILLE FL 32204**

**81** Name

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

**83**

**84** City

**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

Sign the typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**CD  
LEE, THOMAS JR  
142 MADISON ST  
JACKSONVILLE FL 32204**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**VPD  
PADGETT, RICK Z  
142 MADISON ST  
JACKSONVILLE FL 32204**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**PD  
LEE, THOMAS D III  
142 MADISON ST  
JACKSONVILLE FL 32204**

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**STD  
PADGETT, MARY M  
142 MADISON ST  
JACKSONVILLE FL 32204**

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**VPD  
PADGETT, RICK Z  
142 MADISON ST  
JACKSONVILLE FL 32204**

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**VPD  
PADGETT, RICK Z  
142 MADISON ST  
JACKSONVILLE FL 32204**

6.1 TITLE ☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

*M. Mandel*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-3-97**  
Date

**904-354-4643**  
Daytime Phone #

CR2E034 (9/96)