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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000037534 (1)

S & R SKIRTING, INC.

Principal Place of Business Mailing Address

13130 E. SHAWNEE TRAIL

13130 E. SHAWNEE TRAIL

INVENIES EL 24450

## FILED Jan 30 1998 8:00am Secretary of State



INVERNESS FL 34450 INVERNESS FL 34450 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1995 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 21 26 59-3313932 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PONDER, CHARLES J 2667 N FLORIDA AVE. Street Address (P.O. Box Number is Not Acceptable) 82 HERNANDO FL 34442 83 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE MERRITT, SUE I 1.2 NAME NAME 13130 E. SHAWNEE TRAIL 1.3 STREET ADDRESS STREET ADDRESS INVERNESS FL 34450 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITE F DST 21 TITLE Change ARMSTRONG, C. RAY NAME 22 NAME 13130 E. SHAWNEE TRAIL 2.3 STREET ADDRESS STREET ADDRESS INVERNESS FL 34450 CITY - ST - ZIP 2. 4 CITY - ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-ZIP CITY - ST - ZIP DELE"E Change Addition TITE F 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE: Sue & Mouth SUE IMERRITT 1/20/98 3527261968