## 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

## DOCUMENT # P9500060099 (5)

CONSERVATION INSULATION & WINDOWS, INC.

Principal Place of Business	Mailing Address		
126 JOSEPH AVENUE NICEVILLE FL 32578 US	POST OFFICE BOX 346 NICEVILLE FL 32588-0346		

## FILED Mar 06 1997 8:00am Secretary of State



US								
					3. Date Incorporated or Qualified 08/03/1995		e of Last f <b>9/1996</b>	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number		A	Applied For
21		26			59-3333978	· · · · · · · · · · · · · · · · · · ·	N	lot Applicable
Suite Apt	r # Pito	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Sta 23	3*e	City & State			Election Campaign Financing     Trust Fund Contribution			May Be I to Fees
Zip <b>24</b>	Country 25	Z <sub>I</sub> p <b>29</b>	Coun	try	This corporation has liability for Florida Statutes	intangible t		s. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New R	egistered A	gent	
WI	ENNSTROM, KENT A			Name				
	6 JOSEPH AVE		-	2 Street	Address (P.O. Box Number is Not Accepta	hle)		
	CEVILLE FL 32578		,	A SHOCK	Address (1.0. Dox Namber is Not Accepta	Die)		
• • • •			1	33			*********	
			Ē	14 City		FL	<b>85</b> Zip	Code
agent I SIGNATURE	aoi fam har with, and accept the ob-	igations of, Section 607.0505, F	lorida Statu	tes.	poration's board of directors. I hereby acce e required when reinstating:	DATE		
12.		AND DIRECTORS	13.	sgeni signa.ur	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
lift.f	D	DELETE	1.1 Titu	E	PVPST		Change	
NAME	WENNSTROM, KENT A	•	1.2 NAN	1E	WENNSTROM, KENT A		_ ,	
STREET ACCORESS	AND INDEBIL ALPHIUM			EE1 ADDRESS	126 JOSEPH AVENUE			
	NICEVILLE FL 32578		() () ()	LI / HOOHEGO	LIZO JUSEPH AVENUE			
City C1 710			14 (20)	. \$1.7IP				
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4. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in distinction in this arrival report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an efficient 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 12 if Chapter 60 or on an attachment with an address.

SIGNATURE:

IGM TURN AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/97 900 678520