PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000064504

1. Corporation Name

DONALD YERGER SEAMLESS GUTTERS, INC.

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90114 021 ***150.00



Mailing Address Principal Place of Business 1958 CUSTOM DRIVE 1958 CUSTOM DRIVE FORT MYERS FL 33907 FORT MYERS FL 33907 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/18/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0609761 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation owes the current year Intangible Country Zip Zip □No ☐ Yes Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GERHART, UNDA Street Address (P.O. Box Number is Not Acceptable) 1958 CUSTOM DRIVE FORT MYERS FL 33907 83 Zip Code 84 85 City 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 requ CR2E034 (1.1/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE GERHART, LINDA 12 NAME NAME 269 CAROLINA AVENUE 1.3 STREET ADDRESS STREET ADDRESS FORT MYERS BEACH FL 33931 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 2.1 TITLE TITLE YERGER, DONALD R. 22 NAME NAME 4121 SABOL LANE 2.3 STREET ADDRESS STREET ADDRESS FT MYERS FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETÉ 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE ☐ Change □ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP