SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

P95000079348 (5)

ADVANCED FIBERGLASS TECHNOLOGIES, INC.

FILED Jun 21 1996 8:00 am Secretary of State



| Principal Place of Business Mailing Address Mailing Address Mailing Address Mailing Address | | | | | | | | | | | |
|--|--------------------|--------------|---|---------------------------------------|--|----------------------|--|-----------|------------------|------------------------|--|
| 2180 SPARROV SARASOTA FL | | | 2180 SPARROW COURT SARASOTA FL 34239 | | | | | | | | |
| ONINGUIN FL | W7EWV | Or in 170 | रक्रार I क्षा क्षाक्ष्य | | | | 3. Date incorporated or Qualified 10/12/1995 | 3a. Dat | e of Last | Report | |
| 2. Principal Pla | ace of Business | 2a. Mai | ling Address | | | | 4. FEI Number | | - - i | Applied For | |
| 1 | | 26 | | | | | 65-062112 | -ю | | Not Applicable | |
| Suite, Apt. # | , etc | ├ | te, Apt. # etc. | | | | 5. Certificate of Status Desired | | | Additional Required | |
| 2 | | 27 | . D. Charles | | | | 6. Election Campaign Financing | | | O May Be | |
| City & State | | <u></u> ⊢¬ · | City & State | | | | Trust Fund Contribution | | | d to Fees | |
| Z _i p | Country | Zip | | Cour | | | 8. This corporation has liability for | | ax under | s 199 032. | |
| 4 25 | | 29 | 29 30 | | | | Florida Statutes X Yes No | | | | |
| Name and Address of Current Registered Agent | | | | | 81 | None | 10. Name and Address of New Registered Agent | | | | |
| SDE | ENCER, DONALD M | | | | 01 | | | | | | |
| 2180 SPARROW COURT | | | | | | Street Add | ddress (P.O. Box Number is Not Acceptable) | | | | |
| | RASOTA FL 34239 | | | | 63 | | | | | | |
| | | | | | - | | | | 85 2 | p Code | |
| | | | | | 84 | City | poration submits this statement for the purpose board of directors. Thereby acceptions | FL | | | |
| 12. | | ND DIRECTO | | 13. | ITLE | | ADDITIONS/CHANGES TO OFF | ICERS AND | DIRECT Chan | | |
| TITLE | D | | DELFTE | 111 | IILE | | | ì | Chan | je [] Addilior | |
| NAME | SPENCER, DONALD M | | | 12N | | L LEDBONS | | | | | |
| STREET ADDRESS | 2180 SPARROW COURT | | | | | LADDRESS ST-ZIP | | | | | |
| CITY-ST-ZIP TITLE | SARASOTA FL 34239 | | DELETE | 211 | | 31 - 217 | | [| Chan | ge: Additio | |
| NAME | | | | 22N | IAME | | | | | | |
| STREET ADDRESS | | | | 235 | TREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | TT | | | ST · ZIP | | т | Chan | ge Add tig | |
| TITLE | | | DELETE | 317 | | ļ | | ι | GHA-I | a. [1] 440 uu | |
| NAME | | | | | NAME | 1 ADDRESS | | | | | |
| STREET ADDRESS | | | | | | ST-ZIP | | | | | |
| CITY-ST-ZIP TITLE | | | DELETE | 411 | • | J. 2.11 | | | Char | ge Additio | |
| NAME | | | | 4 2 | NAME | | | | | | |
| STREET ADDRESS | | | | 435 | STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | į | | | | | 1 | | | | | |
| | | | | | | ST-ZIP | | | | na Addata | |
| TITLE | | | DELETE | 511 | TiTLE | | | | Char | ge Additio | |
| NAME | | | DELETE | 511 521 | TITLE NAME | | | * " | Char | ge Additio | |
| NAME STREET ADDRESS | | | DELETE | 511 521 533 | TITLE NAME STREE | I ADORESS | | | Char | ge Additio | |
| NAME STREET ADDRESS CHTY-ST-ZIP | | | | 511 521 533 541 | TITLE NAME STREE CHY - | ET ADORESS ST-ZIP | | | Char | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE | | | DELETE | 511 521 533 541 61 | TITLE NAME STREE | ET ADORESS ST-ZIP | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | 511 52! 533 54! 61 62! | TITLE NAME STREE CHY - TITLE NAME | ET ADORESS ST-ZIP | | | | | |

-ST-7P

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 617, Florida Statutes, and that my name appears in Flock 12 or Brock 13 if changed, or on an attachment with an address

IGNATURE:

SIGNATURE AND TYPED ON PRINTED MANE OF SIGNING OFFICER ON DIRECTOR

SIGNATURE: