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PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000085805 (6)

TRI-STATE STUCCO, INC.

FILED Jan 17 1997 8:00am Secretary of State



	of Business	Mailing Address		1 yearlifelt (16 1818) B			
115 B MONTROSE DRIVE NICEVILLE FL 32578		P.O. BOX 5014 NICEVILLE FL 32578-5014					
				3. Date Incorporated 11/01/1995		ate of Last R	eport
2. Principal Plac	te of Business	2s. Mading Address		4. FEI Number			oplied For
1			1066	59-3356878			t Applicable
Suite, Apt. #.	éto.	Suite, Apt #, etc.		5. Certificate of Stat	us Desired	\$8.75 / Fee Re	Additional equired
City & State		City & State	······	6. Election Campaig	n Financing	\$5.00	May Re
3		28 Niceville	, FL	Trust Fund Contri	· · · · · · · · · · · · · · · · · · ·		to Fees
<i>Ζ</i> ₂ρ	Country	7m	Country	8. This corporation I	has liability for intangibl		. 199.032,
<u> </u>	25	29 32588-1066	30 USA		Yes ess of New Registered		
	9. Name and Address of Curren	registered Agent	81 Nam		ess of New Hegistered	Agent	ww
	, PAULA R		To thank	lauis t	aula R.		
	MONTROSE DRIVE		82 Stree	t Address (P.O. Box Number is	s Not Acceptable)		
NICEV	1LLE FL 32578		83				
	A		84 City		Fi	85 Zip	Code
11 Dozeniani Ir.	the system of lot Sections 807 (A)	Aund 607 1608 Florida Statuto	s the above-name	nd corporation submite this stat	ement for the purpose	of changing it	te remietore
office or reg	the provis of socions 607 (4) of sistered agenty of both, in the state familiar with and accept the body.	of Florida, Such change was a	uthorized by the co	orporation's board of directors.	I hereby accept the ap	pointment as	registered
agent Lam	familiar with and accept the obliga-	RITCHES Of, Section 607 0505, Flor	rida Statutes.		1-10	-97	
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			- From stered Amont Signali	re required when rejostation).	DATE		
				re required when reinstating) ADDITIONS/CHAN	IGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
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name immediate point is true and according and mat my signature sharinave the same regardinger as it made under o ceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name attachment with an address. R. Chuis, UST