SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REIL TATE: \$750.)

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #  1. Corporation Name	P96000011911	(0)
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MOGFORD GLAZING, INC.

Principal Place of Business	Mailing Address				
200 RICH ST. VENICE FL 34292	200 RICH ST. VENICE FL 34292				

97 SEP 26 PH 2: 1.0

Principal Plac	e of Business	Mailing Address			{ 1 to a time of a time state in a position definition of a contraction	TI DÆYDI 14001 410FB IDIDA 1400F 4101 FDÆL	
200 RICH ST.		200 RICH ST.			}		
VENICE FL 342	ENICE FL 34292 VENICE FL 34292			DO NOT MIDIT	- N. T. 110 00 A OF		
					3. Date Incorporated or Qualified	IN THIS SPACE  3a. Date of Last Report	
					02/02/1996	Sa. Date of East Report	
2. Principal P	Place of Business	2a. Mailing Address			4, FEI Number	Applied For	
21		26			650659766	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			\$8.75 Additional		
22		27	27		5. Certificate of Status Desired	Fee Required	
City & State	€	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28]	1 - 0 -		Trust Fund Contribution		
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangible		
24 7	25 9. Name and Address of Curr	29 29 Agent	30		Personal Property Tax due June  10. Name and Address of New Re		
- MA	GFORD, EDMUND C III		8	1 Name		3	
	RICH ST.			L DA	DARRECK PRIMIT		
	HGE-FL-34292		le le	2 Street Add	ress (P.O. Box Number is Not Acceptal	ole)	
			8				
			-	4 00 -			
	_		8	4 City	ENICE	FL 85 Zip Code 34292	
11. Pursuant	o the provisions of Sections 607.05	502 and 607.1508, Florida Stalu	tes, the abo			ourpose of changing its registered	
agent. I &	registered agent, or both, in the Sta Im familiar with, and accept the obli	igations of Section 607.0505, FI	autnorizea orida Statut	by the corpora es.	poration submits this statement for the p tion's board of directors. I hereby accep	ot the appointment as registered	
SIGNATURE		TI.		GII P	RUIII	9/25/91	
	Clare ture, typed or printed name of registered r			gent signaturé requ	red when reinstaling)	PATE	
12.	OFFICERS A	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC		
INAME	PRUITT, DARRELL	DECENT	1.2 NAM		60000023		
STREET ADDRESS	613 GRANADA AVE.			ET ADDRESS		9701073004	
CITY-ST-ZIP	VENICE FL 34285		1.4 CITY		****550	).00 ***\$59.00	
TITLE	D	DELETE	2 1 TITLE			Change Addition	
NAME	MOGFORD, EDMUND C III		22 NAM				
STREET ADDRESS	241 S. HARBOR DR.		2.3 STRE	ET ADDRESS		j	
CITY-ST-ZIP	VENICE FL 34285		2. 4 CITY	- \$1-7IP		1	
TITLE	D	DELETE	3.1 TITLE			Change Addition	
NAME	MOGFORD, MARTIN	/ `	3.2 NAM				
STREET ADDRESS	326 PEDRO ST.		3.3 STRE	ET ADDRESS .			
CITY SI 2IP	VENICE FL 34285		3.4. Cily				
TITLE `		L_ DELETE	4.1 THTLE	)		☐ Change ☐ Addition	
NAME -			4, 2 NAM			İ	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		Detere		-ST-ZIP		Change   DARGing	
TITLE		☐ DELETE	5.1 TITLE	l l		Change Addition	
NAME etocet annocce			5.2 NAM				
STREET ADDRESS			L	ET ADDRESS		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITLE			Obeloge Addition	
NAME		Other	6.2 NAM	ļ		JACK TOURISH	
STREET ADDRESS				ET ADDRESS		(NO.	
CITY-ST-ZIP			6.4 CHTY			VV	
411 91 41	<del></del>		0.4 0111	V1 211			

14. I do 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 it am an officer or director of the corporation or the receiver or trusted 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:

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