FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057746 (5)

RICHARD A. RAPPA TRIM CARPENTRY, INC.

Principal Place of Business Mailing Address 9 SANTA MARIA WAY 9 SANTA MARIA WAY PORT ST. LUCIE FL 34952 PORT ST. LUCIE FL 34952-2356 3. Date Incorporated or Qualified 3a. Date of Last Report 07/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0678805 21 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 30 ☐ Yes ☐ No 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CRARY, LAWRENCE E III 555 COLORADO AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 STUART FL 34994 83 84 City 85 Zip Code 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 Signalure, typed or printed harne of registered agent and title if applicable (NO1) Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 96/6) DELFTE 1.1 THUE Change Addition TITLE A. RAPPA RAPPA, RICHARD A NAME 1.2 NAME 9 SANTA MARIA WAY 9 SANTA MARIA WAY STREET ADDRESS 1.3 STREET ADORESS 34952 PORT ST. LUCIE FL 34952 PORT ST L LUCIE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 THEE Change Addition TITLE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-7IP DELFTE Change Addition TITLE 3.1 T(TLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-2IP 34 CHY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETÉ Change Addition TITLE 5.1 HHE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addilion TITLE 61 THUE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 eath, that I 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.

6.4 CITY - ST - ZIP