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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000060775 (9)

FRANKLIN COUNTY GLASS, INC.

Principal Place of Business
HIGWAY 99 & TIMBER ISLAND RD

Mailing Address

## FILED Jun 17 1997 8:00am Secretary of State



| City & State 23 Carrabelle Florida Gity & State 24 Carrabelle Florida Gountry  Zip Country  Zip Country  Zip Country  Added to Fees  8, This corporation has liability for intangible tax under s. 199.032.  | HIGWAY 99 & CARRABELLE F   | TIMBER ISLAND RD<br>:L <b>223</b> 22                 | P.O. BOX 1357<br>CARRABELLE FL 32322-1357 |                                       | 1                     |   |                            |                            |                            |
|--|--|--|---|---------------------------------------|-----------------------|---|----------------------------|----------------------------|----------------------------|
| Sulfix Appl.   |  |  |   |                                       |                       | '   |                            |                            |                            |
| Suite Apil 4, etc.    Suite Apil 4, etc.   Suite   Sui |  |  |   | 2 <i>&lt;</i> ~7                      |                       |   | ) ()                       |                            | <del></del>                |
| Secret Address (P.O. Box Number is Not Acceptable)   Secret Address (P.O. Box Numbe   |  |  |   | · · · · · · · · · · · · · · · · · · · |                       | 37-337069   | <u> </u>                   |                            |                            |
| Signature of the provision of Sections 670 CROP and 607 1506. Fiscind Statutes.  CHANDLER, TERESA A HIGHWAY 98 & TIMBER ISLAND RD CARRABELLE FL 32322  11. Arrangement of the provision of Sections 670 CROP and 607 1506. Fiscind Statutes. The above named corporation submits the statement for the purpose of changing of sections for CROP and 607 1506. Fiscind Statutes. The above named corporation submits the statement for the purpose of changing discreted agent.  11. Arrangement is the provision of Sections 607 CROP and 607 1506. Fiscind Statutes. The above named corporation submits the statement for the purpose of changing discreted agent. The purpose of changing discrete agent. The purpose | 22   | .,   | <u> </u>                                  |                                       |                       | 5. Certificate of Status Desired  | LJ                         |                            |                            |
| 20   20   20   20   20   20   20   20  | City & State   |  |   | Cla (2)                               | 1 .                   | 6. Election Campaign Financing  |                            | \$5.00                     | May Bo                     |
| 1. Present to the provisions of Scaline 600 (150) (150) Finds Statutes. The above-sended corporation submits the statement for the purpose of changing is registered agent.  1. Present to the provisions of Scaline 600 (150) (150) Finds Statutes. The above-sended corporation submits the statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607 (200) and 607 (150) Finds Statutes. The above-sended corporation submits the statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607 (200) Finds Statutes. Statutes the above-sended of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 (200), Finds Statutes. Statutes the above-sended of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 (200), Finds Statutes. Signature requires were encountered 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 (200), Finds Statutes. Sta |  |  |   |                                       | 1 a.                  |   |                            |                            |                            |
| CHANDLER, TERESA A HIGWAY 96 & TIMBER ISLAND RD CARRABELLE FL 32322  11. Pursuant to the provisions of Sections 607 0507 and 507 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 4s registered agent, or both, in the State of Fordis Such change was submitted office or registered agent, or both, in the State of Fordis Such change was submitted office or registered agent, or both, in the State of Fordis Such change was submitted office or registered agent, or both, in the State of Fordis Such change was submitted agent, and mallier with, and except the delayation of Section 507 2507 2507 2507 2507 2507 2507 2507  |  |  | L '                                       |                                       |                       | · · · · · · · · · · · · · · · · · · ·   |                            |                            | . 199.032,                 |
| THANULE, INDEAN  CARRABELLE FL 32322  11. Pursuant to the provisions of Sections 607 6069 and 607 1508, Florida Statutes  B8  City  FL 65 Zip Codo  11. Pursuant to the provisions of Sections 607 6069 and 607 1508, Florida Statutes  B8  City  FL 65 Zip Codo  11. Pursuant to the provisions of Sections 607 6069 and 607 1508, Florida Statutes  B8  City  FL 65 Zip Codo  11. Pursuant to the provisions of Sections 607 607 607 607 607 607 607 607 607 607   | 24 2   |  |   |                                       |                       | A DE VIEW AND A DESCRIPTION OF THE PARTY OF |                            |                            | ·                          |
| The Pursuant of the provisions of Sections 607 0509 and 607 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the displacines of Section 607 0505, Florida Statutes.  SIGNATURE  Signature, lipsed to printed rame of registered agent, and accept the displacines of Section 607 0505. Florida Statutes.  SIGNATURE  Signature, lipsed to printed rame of registered agent, and accept the displaced agent and like it inspectable.  The provision of Sections 607 0509 and accept the displaced agent, and accept the depointment as registered agent, and accept the depointment accept the depointment as registered agent, and accept the depointment accept the depointment accept the depointment accept the depointme | CHANDLER, TERESA A  HIGWAY 98 & TIMBER ISLAND RD  CARRABELLE FL 32322  82 Street Address (P.O. Box Number is Not Acceptable) |  |   |                                       |                       |   |                            |                            |                            |
| office or registerior agont, or both, in the State of Forda Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont. I am familiar with, and accept the obligations of, Socion 607 050S, Florida Statutory.    12.   | Th   | eresa Chanc  | ller.                                     | 84 City                               |                       |   | FL                         | 85 Zip (                   | Dode                       |
| Supration, lyour or present most of registering agent and site of september   Applications   Control   | office or re   | egi <b>stered agent, or both, in the State c</b>     | of Florida, Such change was               | authorized by the co                  | d corpor<br>rporation | ation submits this statement for the<br>i's board of directors. I hereby acce   | purpose of<br>ppt the appo | changing it<br>pintment as | s registered<br>registered |
| TITLE NAME CHANDLER, JIMMY P.O. BOX 1357 CARRABELLE FL 32322 TITLE D SECTIFICAS CHANDLER, THERESA P.O. BOX 1357 CARRABELLE FL 32322 TITLE D SECTIFICAS CHANDLER, THERESA P.O. BOX 1357 CARRABELLE FL 32322 TITLE D SECTIFICAS CHANDLER, THERESA P.O. BOX 1357 CARRABELLE FL 32322 TITLE DELETE DELETE DELETE 31 THUL 32 NAME 33 STREET ADDRESS CITY-ST-2P TITLE DELETE  |  | Signature, typed or printed name of registered agent | and title if applicable (NC               | TE: Registered Agent signatu          | re required           | råen reins∣aling)   | DATE                       |                            |                            |
| NAME SIREET ADDRESS CITY-ST-ZIP CHANDLER, JIMMY P.O. BOX 1357 CARRABELLE FL 32322  DELETE NAME CHANDLER, THERESA P.O. BOX 1357 CARRABELLE FL 32322  DELETE D | 12.  |  |   | 13.                                   |                       |   | CERS AND                   |                            |                            |
| SIREE ADDRESS CITY-ST-ZP CARRABELLE FL 32322   DELETE   1.3 STREET ADDRESS   ACCULL SCITULE STATE   CANOMIC CITY BROWN   THERESA   CHANDLER, THERESA   CITY-ST-ZP   CARRABELLE FL 32322   DELETE   STREET ADDRESS   CITY-ST-ZP   CARRABELLE FL 32322   DELETE   STREET ADDRESS   CITY-ST-ZP   CARRABELLE FL 32322   DELETE   STREET ADDRESS   CITY-ST-ZP   CAST FO INST, 71   32328   CITY-ST-ZP   CAST FO INST, 71    | i  | D Pres   | ☐ DELETE                                  |                                       | Vit                   | tac 0 0 cost  |                            | Change                     | Addition                   |
| CITY-ST-ZIP  CARRABELLE FL 32322  TITLE  D SECTIFEA;  CHANDLER, THERESA  NAME  CHANDLER, THERESA  P.O. BOX 1357  CARRABELLE FL 32322  CITY-ST-ZIP  THE  DELETE  DELETE  DELETE  DELETE  14 CITY-ST-ZIP  CASTPOINT, 71 32328  LOTING: STREET ADDRESS  CITY-ST-ZIP  THE  DELETE  DELETE  14 CITY-ST-ZIP  CASTPOINT, 71 32328  LOTING: STREET ADDRESS  CITY-ST-ZIP  THE  DELETE  DELETE  DELETE  15 TITLE  DELETE  DELETE  DELETE  DELETE  DELETE  16 TITLE  DELETE  DELE |  |  | ·/A-)                                     |                                       | 711                   | nothy to to   |                            |                            |                            |
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| STREET ADDRESS   P.O. BOX 1357   P.O. BOX 13   | NAME   | - · · · · · · · · · · · · · · · · · · ·              | (/a\                                      | 2.2 NAME                              | 冷ì                    | mmy thandler  |                            |                            |                            |
| NAME   | STREET ADDRESS   |  | <b>Y</b> H)                               | 2.3 STREET ADDRESS                    | 58                    | 3 Lin Street  |                            |                            |                            |
| NAME   | DITY-ST-ZIP  | CARRABELLE FL 32322                                  | **************************************    | 2. 4 CITY - ST - ZIP                  | 61                    | ISTPOINT, +1 3232   | 28                         |                            |                            |
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| STREET ADDRESS   | 1  |  |   | <b>i</b>                              |                       |   |                            |                            |                            |
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| CITY-\$1-ZIP 6.4 CITY-\$1-7IP  |  |  |   |                                       |                       |   |                            |                            |                            |
|  |  |  |   |                                       |                       |   |                            |                            |                            |
|  |  | y cartify that the information surrolled             | with this films close not our             |                                       | stated in             | Section 119 07(3)(i) Florida Statut   | ne I further               | cortify that               | tho                        |

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 on an attachment with an address.

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