


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

**FILED**  
**Apr 01, 1999 8:00 am**  
**Secretary of State**

04-01-1999 90057 001 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		 <b>FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P96000063306</b>			
1. Corporation Name <b>BUILDERS VINYL SIDING, INC.</b>			
Principal Place of Business <del>6853 CEDAR RIDGE DR PENSACOLA FL 32526</del>		Mailing Address <del>6853 CEDAR RIDGE DR PENSACOLA FL 32526</del>	
2. Principal Place of Business 21 <b>8608 Eight Mile Creek Rd</b>		2a. Mailing Address 26 <b>8608 Eight Mile Creek Rd</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State 23 <b>Pensacola, FL</b>		City & State 28 <b>Pensacola, FL</b>	
Zip Country 24 <b>32526</b> 25		Zip Country 29 <b>32526</b> 30	
9. Name and Address of Current Registered Agent <b>STURGEN, WILLIAM M JR 2253 COUNTRY PL CIR PENSACOLA FL 32534-9501</b>			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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 <i>William M. Sturgen Jr.</i> DATE <b>3-26-99</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<b>D/P/T</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SPERANZO, DANIEL</b>	1.2 NAME	
STREET ADDRESS	<b>6853 CEDAR RIDGE DR</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PENSACOLA FL</b>	1.4 CITY-ST-ZIP	
TITLE	DST <input type="checkbox"/> DELETE	2.1 TITLE	<b>D/VP/S</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SPERANZO, SHERRY</b>	2.2 NAME	
STREET ADDRESS	<b>6853 CEDAR RIDGE DR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PENSACOLA FL</b>	2.4 CITY-ST-ZIP	
TITLE	DVP <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WHITE, TERRY P</b>	3.2 NAME	
STREET ADDRESS	<b>6839 CEDAR RIDGE DR</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PENSACOLA FL</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/29/99**

Date

**850 941-2587**

Daytime Phone #

CR2E034 (11/98)