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Jan 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000070588 (4)

1. Corporation Name

VINYL DECK & RAIL DISTRIBUTORS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 17141 WATERSEdge CIR N FT MYERS FL 33917		Mailing Address 17141 WATERSEdge CIR N FT MYERS FL 33917	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SAUER, CYNTHIA 17141 WATERSEdge CIR N FT MYERS FL 33917		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	SMITH, LISA O	1.2 NAME	
STREET ADDRESS	172 TAHITI RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 34145	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	PRESIDENT
NAME	SAUER, CYNTHIA	2.2 NAME	SAUER, CYNTHIA
STREET ADDRESS	17141 WATERSEdge CIR	2.3 STREET ADDRESS	17141 WATERS EDGE CIR
CITY-ST-ZIP	N FT MYERS FL 33917	2.4 CITY-ST-ZIP	N FT MYERS, FL 33917
TITLE	S	3.1 TITLE	
NAME	SMITH, CARL J	3.2 NAME	
STREET ADDRESS	172 TAHITI RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 34145	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	VICEPRESIDENT
NAME	SAUER, GREGORY	4.2 NAME	SAUER, GREGORY
STREET ADDRESS	17141 WATERSEdge CIR	4.3 STREET ADDRESS	17141 WATERS EDGE CIR
CITY-ST-ZIP	N FT MYERS FL 33917	4.4 CITY-ST-ZIP	N FT MYERS, FL 33917
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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.

SIGNATURE:

Cynthia Sue Jones

Jan 6 98 941-547-0000

CR2E034 (10/97)