

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jun 27 1997 8:00am
Secretary of State

DOCUMENT # P96000071190 (8)

1. Corporation Name
B.S.F. BUILDING SYSTEMS, INC.



Principal Place of Business

1500 S HWY 27
SUITE A
CLERMONT FL 34711

Mailing Address

1500 S HWY 27
SUITE A
CLERMONT FL 34711-3541

2. Principal Place of Business

21 503 Seminole St.

2a. Mailing Address

26 503 Seminole Street

Suite, Apt. #, etc.

22 P.O. Box 2260

Suite, Apt. #, etc.

27 Post Office Box 2260

City & State

23 MINNEOLA, FLA.

City & State

28 MINNEOLA, FLA.

Zip

24 34755

Country

25 U.S.

Zip

29 34755

Country

30 U.S.

9. Name and Address of Current Registered Agent

BAXLEY, STEPHEN L
1500 SOUTH HIGHWAY 27
SUITE A
CLERMONT FL 34711

3. Date Incorporated or Qualified

08/27/1996

3a. Date of Last Report

4. FEI Number

59-3396723

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Stephen L Baxley

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

(NOTE: Registered Agent Signature required when reinstating)

6/24/97

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D BAXLEY, STEPHEN L
1500 S HWY 27 SUITE A
CLERMONT FL 34711

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D FERBER, RICHARD E
1500 S HWY 27 SUITE A
CLERMONT FL 34711

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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

1/14/97 352-294-1212

CR2E034 (9/96)