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

FILED May 06 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000078838 (5) **ACTION AUTOMATIC DOOR COMPANY** Principal Place of Business Mailing Address 12660 METRO PARKWAY 12000 METRO PARKWAY FORT MYERS FL 33912 FORT MYERS FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/23/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0695922 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent COSTELLO, TRUMAN J 12670 NEW BRITTANY BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 101 83 FORT MYERS FL 33907 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, t 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE EBEL, GEORGE F IV E034 NAME 1.2 NAME 12988 COCO PLUM LANE STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME **BOLLIN. ROBERT** 2.2 NAME STREET ADDRESS 4842 OLDE MEADOW LANE 2.3 STREET ADDRESS SYLVANIA OH CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE SMITH, GREGORY NAME 3.2 NAME 17484 LEBANON ROAD STREET ADDRESS 3.3 STREET ADDRESS FT MYERS FL CITY - ST - ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Addition NAME TROWE, BRADLEY 4. 2 NAME 1735 BRANTLEY ROAD, #1915 STREET ADDRESS 4.3 STREET ADDRESS FT MYERS FL 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE PERRY, DENIS 5.2 NAME NAME 13403 IRONTON DRIVE STREET ADDRESS 5.3 STREET ADDRESS TAMPA FL 5.4 CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition

14. Thereby 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.

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6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

62 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

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