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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000080614 (6)

1. Corporation Name

FLORIDA WINDOWS & SIDING, INC.

Principal Place of Business

210 - 56TH STREET
HOLMES BEACH FL 34217

Mailing Address

210 - 56TH STREET
HOLMES BEACH FL 34217-1601



2. Principal Place of Business

21 525 56th St

Suite, Apt. #, etc.

22 City & State

23 Holmes Beach FL

24 Zip

34217

25 Country

USA

2a. Mailing Address

26 525 56th St

Suite, Apt. #, etc.

27 City & State

28 Holmes Bch FL

29 Zip

34217

30 Country

USA

3. Date Incorporated or Qualified

09/26/1996

3a. Date of Last Report

4. FEI Number

65-0715712

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

9. Name and Address of Current Registered Agent

GEERAERTS, KATHLEEN T
210 - 56TH STREET
HOLMES BEACH FL 34217

10. Name and Address of New Registered Agent

81 Name KATHLEEN T. Geeraerts
82 Street Address (P.O. Box Number is Not Acceptable)
525 56th St.
83 Holmes Beach, FL
84 City FL 85 Zip Code 34217

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

TITLE D
NAME GEERAERTS, KATHLEEN T
STREET ADDRESS 210 - 56TH STREET
CITY-ST-ZIP HOLMES BEACH FL 34217

TITLE VICE PRES
NAME ANDREW L. CHENNAULT
STREET ADDRESS 211 A MAGNOLIA AVE.
CITY-ST-ZIP ANNA MARIA, FL 39217

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Geeraerts, Kathleen T.
1.3 STREET ADDRESS 525 56th St.
1.4 CITY-ST-ZIP Holmes Beach, FL 34217

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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: Kathleen T. Geeraerts 2/2/97

CR2E034 (9/96)