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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000081604 (6)

QUALITY FABRICATION OF NORTHWEST FLORIDA, INC.

Principal Place of Business Mailing Address 3276 W. SCOTT STREET P.O BOX 18269 PENSACOLA FL 32505 PENSACOLA FL 32523 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 59-3408199 26 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 8. This corporation owes or has paid the current year Intangible 24 X Yes 29 30 25 Personal Property Tax due June 30. □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 STACKHOUSE, HARRY B Name 125 W. ROMANA STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 800 PENSACOLA FL 32501 83 R4 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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, typed or ponted name of registered agent and title 4 applicable (NOTE: Ringistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE 1.1 TITLE ☐ Change Addition CANTWELL, BRIAN KEITH NAME 1.2 NAME 24650 BREWER ROAD STREET ADDRESS 1.3 STREET ADDRESS **ROBERTSDALE AL 36567** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change Addition 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE Change Addition

CITY-ST-2IP 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.

5.2 NAME

6.1 THILE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

KENTH CANTWELL 2/22/52

800/438.2912

Change

Addition

**FILED** 

Feb 27 1998 8:00am

Secretary of State