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

PROFIT CORPORATION ANNUAL REPORT

1997

CHY-ST-7P



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 09 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000101833 (7)

FIBERGLASS SERVICES, INC.

Principal Place of Business Mailing Address							· · · · · · · · · · · · · · · · · · ·					
5612-C LAWTO SARASOTA FL			12-C LAWTON DRIVE Arasota FL 34233-2416									
								3. Date incorporated or Qualified 12/16/1996	3a. Date o	Last R	eport	
Principal F	Place of Busine	ess	2a. Ma	2a. Mailing Address				4. FEI Number Appl			plied For	
21			26					65-0/23	65-072 3380 Not Applicable			
Suite, Apt			27					5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & Stat	te		Cit	City & State				6. Election Campaign Financing \$5.00 May Be				
23			28					Trust Fund Contribution Added to Fees				
—¬ Zip	-	Country	F	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,				
24			29				,	Florida Statutes Yes No				
		nd Address of Cu	rrent Hegistere	d Agent				10. Name and Address of New Re	jistered Agei	nt		
MCLAIN, GEORGE R						Name						
1800 SECOND STREET SUITE 717					6:	Street Add		ess (P.O. Box Number is Not Acceptab	e)			
SAR	ASOTA FL 3	4236				3						
					8-	1	City		FL 8	5 Zip (Code	
office or r	redistored adei	ns of Sections 607. nt, or both, in the S i, and accept the ol	tate of Florida S	Such change was	authorized t	w	the corporate	oration submits this statement for the poon's board of directors. I hereby accep	urpose of cha t the appointr	nging it nent as	s registered registered	
SIGNATURE						••••						
40	Signature, lyped or	printed name of registered				jen	nt egnature require	d when reinstating)	DATE			
12. Titef	T D	OFFICERS	AND DIRECTO	DELETE	13. 1.1 TITLE		·····	ADDITIONS/CHANGES TO OFFIC		Change	IS IN 12	
	-	n		1.2 N 1.3 S					L	CHANGE	LI Adoleon	
NAME	KAH, DAVI	ND STREET										
STREET ADDRESS	SARASOTA						ADDRESS					
CITY - ST - ZIP TITLE	SAMOUIA	1 FL 34239		DELETE	1.4 CiTY-	SI-	-ZIP			Channa	T Addition	
				Corcur	2.1 TITLE				. ப	Change	Addition	
NAME CENTER ADDRESS]				2.2 NAME		'					
STREET ADDRESS	į				2 3 STREE		1					
CHTY - ST - ZIP TITLE	!			DELETE	2.4 CITY 3.1 TITLE	-51	T-ZIP			Channa	Additon	
				[_] OLLEIL						Change	L Addition	
NAME PENSON APPROVED					3.2 NAME							
STREET ADDRESS					3.3 STREE							
CITY-S1-ZIP TITLE				DELETE	3.4. CITY	\$T	T-ZIP			<u> </u>	4.2200	
				☐ Detere	4.1 TITLE				لببا	Change	Addition	
NAME					4.2 NAM							
STREET ADDRESS					4.3 STREE		- 1					
CITY - ST - ZIP	 			DELETE	4.4 CITY-	ST.	- ZIP			Change	Additor	
TITLE				M DETELE	5.1 TITLE				L.	Change		
NAME					5 2 NAME							
STREET ADORESS					5 3 STREE							
CITY-SI-7IP				DESETE	5.4 CiTY-	ST-	- ZIP			<u> </u>	1.425	
TITLE .				DELETE	61 TITLE		N		Ш	Change	Addition	
NAME	}				6.2 NAME							
STREET ADDRESS	Í				6.3 STREE	TA	ADDRESS					

divid W. Kath E David W. Kah

64 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.