

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 19, 1999 8:00 am
Secretary of State

07-19-1999 90010 010 ***150.00

DOCUMENT # **P97000022717**

1. Corporation Name

WESTWIND CONSTRUCTION & ALUMINUM, INC.

Principal Place of Business

**2301 BRUNER LN
SUITE B-2
FT MYERS FL 33912**

Mailing Address

**2301 BRUNER LN
SUITE B-2
FT MYERS FL 33912**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1997

4. FEI Number

65-0732575

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 owes the current year
Intangible Personal Property.



Yes ☐ No

2. Principal Place of Business

21 1020 U Pine Island Rd

2a. Mailing Address

26 1020 U Pine Island Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 309 + 310

27 309 - 310

City & State

City & State

23 Cape Coral FL

28 Cape Coral FL

Zip

Country

Zip

Country

24 33909

25 USA

29 33909

30 USA

9. Name and Address of Current Registered Agent

**HRKACH, JOEL
1031 SE 8TH TERRACE
APT 2C
CAPE CORAL FL 33990**

10. Name and Address of New Registered Agent

81 Name

HRKACH JOEL

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

15 SE 10TH Ave

83

84 City

Cape Coral

FL

85 Zip Code

33990

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 ☐ DELETE

NAME **DP**

STREET ADDRESS **HRKACH, JOEL**

CITY-ST-ZIP **1031 SE 8TH TER APT 2C**

CAPE CORAL FL 33990

TITLE ☐ DELETE

NAME **DVS**

STREET ADDRESS **FULLER, SCOTT A**

CITY-ST-ZIP **112 NE 5TH AVE**

CAPE CORAL FL 33909

TITLE ☐ DELETE

NAME **DVT**

STREET ADDRESS **FULLER, SEAN C**

CITY-ST-ZIP **13501 ORANGE RIVER BLVD**

FT MYERS FL 33905

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **DP**

1.3 STREET ADDRESS **HRKACH JOEL**

1.4 CITY-ST-ZIP **15 SE 10TH Ave**

Cape Coral FL 33990

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 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:

Scott A. Fuller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/99
Date

574-7057
Daytime Phone #

CR2E034 (5/99)



Charles Abels Massie, CPA, PA

12065 Metro Parkway, Suite 101, Fort Myers, FL 33912

Phone (941) 768-2171 / Fax (941) 768-6074

P970000 22717
590504-90010-10

July 12, 1999

Florida Department of State
Division of Corporations
Annual Reports Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Re: Westwind Construction & Aluminum, Inc.
FEI#: 65-0732575
Subject: Late filing of annual report

Westwind Construction & Aluminum, Inc. is filing this report late because they never received the original report documentation due to the address change. They did not receive all of the expected forwarded mail. They are requesting an abatement of the \$400.00 penalty for late filing due to these unusual and singular circumstances.

Enclosed please find a check in the amount of the originally required \$150.00. Thank you in advance for your consideration.

Sincerely,

Charles Abels Massie, CPA

CAM/ldy

cc: Westwind Construction & Aluminum, Inc

Enclosure