## 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 # P97000028873 (2)

WINDOWS WITH A VIEW, INC.

Principal Place of Business Mailing Address
999 77TH STREET BS8-17TH STREET

## FILED May 14 1998 8:00am Secretary of State



VERO BEACH FL 3296		VERO BEACH FL 32963			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/27/1997	
2. Principal Pla	ace of Bucipess	2a. Mailing Address	100		4. FEL Number Applied For	
21 816	11- Street	26 6 6	- 37	ree		
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	<i>^</i>	City & State	١ .	<del></del>	6. Election Campaign Financing \$5.00 May Be	
23 Vero	Beach FI	28 Vero be	<u> </u>	<del>                                      </del>	Trust Fund Contribution Added to Fees	
Zip	Country	Zip 2000 0	Couplry	(c .v.	8. This corporation owes or has paid the current year Intangible	
24 3291			30 0	SA		
	9. Name and Address of Current	uedistaten vibaut	81	Name	10, Name and Address of New Registered Agent	
PEGG, NOBERT L				Name	, 	
1428 21ST STREET			62	82 Street Address (P.O. Box Number is Not Acceptable)		
VERO BEACH FL 32963			83			
			84	City	85 Zip Code	
44 Duramant to	the provisions of Sections 607 0602	and 607 1609 Elorido Ctatuto	s the about	l	d corporation submits this statement for the purpose of changing its registered	
office or re	gistered agent, or both, in the State of	if Florida. Such ch <b>ange was a</b>	uthorized by	the corp	or corporation's board of directors. I hereby accept the appointment as registered	
<b>ag</b> ent Lan	n <b>fam</b> iliar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Statute	s.		
SIGNATURE	Signature, typed or printed name of registered agent	soud table of southern the Control of the Control o	Convitored Ac		re required when reinstating) DATE	
12.	OFFICERS AND		13.	n signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	FULFORD, E. PERRY		1.2 NAME		_ , _	
STREET ADDRESS	1045 CLIPPER ROAD		1.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963-2540	,	1.4 CITY - S			
TITLE	D	DELETE	2.1 TITLE	: <u>-511</u>	Change Addition	
NAME	FULFORD, ALLISON K	,	2 2 NAME			
STREET ADDRESS	1045 CLIPPER ROAD		2.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963-2540		2. 4 CITY-	ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		President Wice Pres, Secreta Change Addition Melissa Kent 10295 454 Street Class 1)	
NAME	FULFORD KENT, MELISSA KE	NT	3.2 NAME		Melissa Kent	
STREET ADDRESS	182 MABRY STREET		3.3 STREET	ADDRESS	6295 6541 Street (12181)	
CITY-ST-ZIP	<b>GEBASTIAN FL 32958</b>		3.4. CITY - :	ST-ZIP	Vero Bch E1 329107	
TITLE		☐ DELETE	4.1 TITLE	_	Treasure Change Addition	
NAME			4. 2 NAME		Rodenic Stark	
STREET ADDRESS			4.3 STREET	ADDRESS	6295 65th St.	
CITY-ST-ZIP			4.4 CITY - S	T-ZIP	Vero Bch +1 32967	
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CI1Y - S	IT-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - S			
14. I hereby of	artify that the information supplied with	this filing does not qualify for	r the exemp	tion state	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an	
officer or d	li <b>rector of the co</b> rporation or the recei	ver or trustee emp <b>owered to e</b>	xecute this	report as	is required by Chapter 607, Florida Statutes; and that my name appears in	
Block 12 o	<b>r Bloc</b> k 13 if changed, or on an atlact	nment with an address.				