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

Mailing Address

1209 GRENADA AVENUE

CLEARWATER FL 33764

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

02-18-1999 90047 023 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000102205

SOUTHEAST DOOR, INC.

Principal Place of Business

1209 GRENADA AVENUE

CLEARWATER FL 33764

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

					12/04/1997		
	Place of Business 2a. Mailing Address				4. FEI Number	Ā	pplied For
21		26			59-3481937	N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	Additional
22 27					5. Certifcate of Status Desired		equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23					Trust Fund Contribution	-	to Fees
Zip	Country	Zip	Country	1	8. This corporation owes the current year Intangible		
24				Personal Property Tax. ☐ Yes ☐ No			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent	
DAV	HOEE CHARLES S III		81	Name			
Dayhoff, Charles S III 3830 Tampa Road				Street Add	Iress (P.O. Box Number is Not Acceptable)		
	TE 150				(To: Dax Hamber to Hot Acceptable)		
			83		- To-	1	
PAL	M HARBOR FL 34684		84	City		· · · · · · · · · · · · · · · · · · ·	
				,	poration submits this statement for the purpose	- E ()	Code
SIGNATURE	m familiar with, and accept the obligation of th	mions of, Section 607.0505, Flor	ida Statutes	i.	on's board of directors. I hereby accept the ap		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	GULLEY, MATTHEW A		1.2 NAME		•	_ ,	
STREET ADDRESS	1209 GRENADA AVENUE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 33764		1.4 CITY-S	r-zip			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	GULLEY, LINDA A		2.2 NAME		•		
STREET ADDRESS	1209 GRENADA AVENUE		2.3 \$TREET	ADDRESS	· · · · · · · · · · · · · · · · · · ·	-	
CITY-ST-ZIP	CLEARWATER FL 33764		2. 4 CITY-S				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME			ca.igo	
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S				
TITLE		☐ DELETE	4.1 TITLE	- 211		Change	☐ Addition
NAME			4. 2 NAME			Change	Addition
STREET ADDRESS			A CONTRACTOR				

.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TTLE

6.2 NAME

DELETE

☐ DELETE

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, with all other like empowered. - LINDA A GULLEY 2-1-99 727-538-0153

☐ Change

☐ Addition

☐ Addition