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

CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # S65035

(5)

FORTENBERRY FINISH CARPENTRY, INC.

Mailing Address 3964 PINTO RD MIDDLEBURG FL 32068

**FILED** Apr 13 1998 8:00am Secretary of State



Principal Place of Business 3964 PINTO RD MIDDLEBURG FL 32068 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1991 2. Principal Place of Business Mailing Address FEI Number 2a. Applied For 21 26 59-3068907 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zio This corporation owes or has paid the current year Intangible Yes □Ño 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **B1** FORTENBERRY, JERRY T. 3964 PINTO RD Street Address (P.O. Box Number is Not Acceptable) MIDDLEBURG FL 32068 City Zip Code 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, lyped or proted name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE FORTENBERRY, JERRY T. NAME 1.2 NAME 3964 PINTO RD 1.3 STREET ADDRESS STREET ADDRESS MIDDLEBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ... Change Addition 21 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADORESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

1. 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 addrage.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

CR2E034 (10/97