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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # S67948

(7)

WHITTELSEY ARCHITECTURAL WOOD SALES, INC.

Principal Place of Business Mailing Address

4110 PLANVILLE RD 3906 Oak Street 4110 PLANVILLE RD. 3906 Oak Street CINCINNATI OH 45227-3245

US US

FILED May 08 1997 8:00am Secretary of State



CINCINNATI OF	H 45227	CINCINNATI OH 45227-	3245		
US 		US		3. Date Incorporated or Qualified 07/18/1991	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Same as above		26 Same as above		31-1330729	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required
. City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30] Yes ☐ No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	gistered Agent
ADN	AIRE, JOHN G.		81 Name		
251	1 PONCE DE LEON BLVD		82 Stree	I Address (P.O. Box Number is Not Acceptal	ole)
COF	RAL GABLES FL 33143		83		
			<u> </u>		
			84 City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.05	502 and 607.1508, Florida Sta te of Florida, Such change wa	atutes, the above-name as authorized by the co	d corporation submits this statement for the proporation's board of directors. I hereby acce	
agent. La	m familiar with, and accept the obli	igations of, Section 607.0505,	Florida Statutes.	,	
SIGNATURE	Signature, typed or printed name of registered a	oeut and title if anglicanic 0	NO1F Registered Agent signatu	re required when roinslating)	DAN
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	CPT	DELFTE	1,1 TITLE		CERS AND DIRECTORS IN 12 Change Addition
NAME	WHITTELSEY, DANIEL I		1.2 NAM[
STREET ADDRESS	7880 ASHLEY VIEW DRIVE		1.3 STREET ADDRÉSS		
CITY-ST-ZIP	CINCINNATI OH		1.4 CITY - ST - 7IP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME .	HILDRETH, ROBERT		2.2 NAME		-
STREET ADDRESS	5908 LEE VALLEY RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	EDINA MN 55439		2. 4 O/TY - ST - ZIP		
TITLE		☐ DELETE	3.1 THLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-7)P		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME	E		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-S1-7IP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY- \$1 - ZIP		
TITLE .		DELETE	6.1 THLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
: CITY-ST-ZIP			6.4 CITY- ST- ZIP	1	

4. 1 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 eath; 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.

MICHATURE DA COLON LA STATION THE THE THE COLON A 125/0: