

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S74975** (1)

1. Corporation Name

STRUCTURAL PANELS, INC.



Principal Place of Business

Mailing Address

**350 BURBANK RD.
OLDSMAR FL 34677
US**

**350 BURBANK RD.
OLDSMAR FL 34677
US**

3. Date Incorporated or Qualified

08/20/1991

3a. Date of Last Report

06/23/1995

4. FEI Number

59-3062008

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 has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LITTLE, THOMAS C.
2123 N.E. COACHMAN ROAD
SUITE A
CLEARWATER FL 34625**

81 Name

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

83

84 City

FL

85 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, type or print name of registered agent and the applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**PD
FORSBERG, JAMES C.
350 BURBANK RD.
OLDSMAR FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
WINIARCZYK, RONALD F.
350 BURBANK ROAD
OLDSMAR FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**D
MEYERSON, STEVEN
350 BURBANK ROAD
OLDSMAR FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**S
LITTLE, THOMAS C.
2123 N.E. COACHMAN ROAD, SUITE A
CLEARWATER FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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SIGNATURE:

STEVE MEYERSON

7-29-96

813-855-2627

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR