PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V13126

1. Corporation Name

ACCENT AWNING COMPANY

				•
Principal	Place	of	Business	

Mailing Address

11575 MARSHWOOD LANE SW FT. MYERS FL 33908 11575 MARSHWOOD LANE SW FT. MYERS FL 33908

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90043 005 ***150.00



DO NOT	WRITE IN	THIS SPACE	CI
--------	----------	------------	----

3. Date Incorporated or Qualifed

Suite, Apt. #, etc. 2								02/10/1992			
Sulfo, Apt. #, etc. Sulfo, Apt. #, etc.	2. Principal Pla	ace of Business	2a. Mailing	Address				4. FEI Number			Applied For
Suite, Apt. #, etc. 2 27 5. Certificate of Status Desired \$8.75 Additional \$8.75 Additional	21		26					65-0314439			Not Applicable
City & State Ci	Suite, Apt. #	#, etc. `	<u> </u>	Apt. #, etc.				5. Certifcate of Status Desired		7	
Trust Fund Contribution	22			State		-		C Election Communication Eigensing			
Zip	·	3	⊢ ′	Side							
9. Name and Address of Current Registered Agent OWENS, KETTH R. 1825 ARDSLEY WAY SANBEL FL 33957 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 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, or with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE POWENS, KETTH R 12. AUGIN-ST-2P SANIBEL FL 10. STREET ADDRESS 1. STR	23	Country			Country	,			ront voor let		20 10 1 000
9. Name and Address of Current Registered Agent OWENS, KETTH R. 1825 ARDSLEY WAY SANIBEL FL 33957 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 agent. I am finally with, and accept the obligations of. Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am finally with, and accept the obligations of. Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am finally with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 14. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 25. STREET ADDRESS 26. ADDITIONSICHANISES TO OFFICERS AND DIRECTORS IN 12 OWENS, THOMAS A 13. STREET ADDRESS 26. STREET ADDRESS 27. STREET ADDRESS 28. STREET ADDRESS 28. STREET ADDRESS 29. STREET ADDRESS 29. STREET ADDRESS 29. STREET ADDRESS 20.	—		— '	[24	¬ ´			i i	rent year no		□No Ì
OWENS, KETTH R. 1825 ARDSLEY WAY SANIBEL FL 33957 B2 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation's board of directors. I heroby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and a statutes agent. I am familiar with, and accept the obligations of, Section 607,0502, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P OWENS, KETTH R OWENS, KETTH R OWENS, KETTH R OWENS, THOMAS A STREET ADDRESS OWENS, THOMAS A STREET ADDRESS OWENS, THOMAS A 1.3 STREET ADDRESS OWENS, TAP OWENS, THOMAS A 1.3 STREET ADDRESS OWENS, TAP OWENS, DAVID A 1.3 STREET ADDRESS OWENS, TAP	24	. 1			<u>"</u>				Registered		
OWENS, KETH R. 1825 ARDSLEY WAY SANIBEL FL 33957 44 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 agent. and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. James a submit and the florida Statutes of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and the floridation of Change is registered agent. James and James		9. Name and Address of Current	registered A	Agust	81	Nan	ne	TO. Italia alia para socio.			
11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered officer or registered signer, or on the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered officer or registered signer, or on the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signer, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 22	OWE	NS KEITH B		,							
SANIBEL FL 33957 11. Pursuant to the provisions of Sections 807 0502 and 607 1508. Florida Statutes. 11. Pursuant to the provisions of Sections 807 0502 and 607 1508. Florida Statutes. 11. Pursuant to the provisions of Sections 807 0502 and 607 1508. Florida Statutes. 11. Pursuant to the provisions of Sections 807 0502 and 607 1508. Florida Statutes above—named corporation's board of directors. I hereby accept the appointment as registered office or egistered agent. I am finalizar with, and accept the obligations of, Section 607 0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 15. TITLE OWENS, KEITH R 12 ANDE 13. STREET ADDRESS 13. STREET ADDRESS 14. GTY-51-2P 14					82	Stre	et Addre	ss (P.O. Box Number is Not Accep	table)		i
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 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, typed or present agent of registered agent and title if applicable (NOTE: Registered Agent department) DATE 12.					02						
T. 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 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, 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 and the displicable (NOTE: Registered Agent agenture required when releasting) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. TITLE 12. OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGE	SANI	DEL PL 3395/			83						
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 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 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 12. OWENS, KEITH R STREET ADDRESS SANIBEL FL 12. YP NAME OWENS, THOMAS A 13. STREET ADDRESS OWENS, THOMAS A 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. YP Change Addition Addition Addition OWENS, THOMAS A 13. STREET ADDRESS 14. GMTV. ST. ZP CHY. ST. ZP CHY. ST. ZP OWENS, THOMAS A 13. STREET ADDRESS 14. GMTV. ST. ZP CHY. ST. ZP CHY. ST. ZP TITLE OWENS, THOMAS A 13. STREET ADDRESS 14. GMTV. ST. ZP CHY. ST. ZP CHY. ST. ZP CHY. ST. ZP TITLE OWENS, DAVID A 13. STREET ADDRESS 14. GMTV. ST. ZP CHY. ST. ZP					84	City			·	85 2	Zip Code
office or registered agent, or both, in the State of Honda. Such change was authorized by the corporation's todard or directors. Thereby accept the appointment as registered agent and marillar with, and accept the obligations of, Section 607/505/C. Florida Statutes. SIGNATURE 3gonature, typed or printed nume of registered agent and the if applicable (NOTE: Registered Agent signature required when retristancy) 12. OFFICERS AND DIRECTORS IN 12 TITLE P OWENS, KETH R 12. NAME 12. STREET ADDRESS CITY-ST-ZIP NAME 1825 AROSLEY WAY 1.35TREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP OWENS, THOMAS A 1025 TRIKE LANE 2.3 STREET ADDRESS CITY-ST-ZIP NAME OWENS, DAVID A 1854 IBIS LANE 3.3 STREET ADDRESS CITY-ST-ZIP NAME 1826 IBIS LANE 3.3 STREET ADDRESS CITY-ST-ZIP Addition Add					1						
Signature, typed or primed name of registered agent and titled if applicable 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P OWENS, KEITH R STREET ADDRESS 13. STREET ADDRESS STREET ADDRESS SAROSLEY WAY 1.3 STREET ADDRESS SANIBEL FL 1.4 CITY-ST-ZIP TITLE VP OWENS, THOMAS A 22 NAME 10351 STRIKE LANE BONITA SPRINGS FL 33923 2.4 CITY-ST-ZIP TITLE TI	office or re	anistered agent or both in the State of	Florida Such	change was auti	iorizea ov	tne co	ed corpo rporation	ration submits this statement for the 's board of directors. I hereby acce	e purpose of pt the appoin	changing ntment a	g its registered s registered
12.	SIGNATURE								CATE		
TITLE OWENS, KEITH R OWENS, KEITH R 12 AND E 1825 AROSLEY WAY 13 STREET ADDRESS SANIBEL FL 14 CHANGE ADDRESS SANIBEL FL 14 CHANGE ADDRESS SANIBEL FL 15 TITLE OWENS, THOMAS A 22 NAME STREET ADDRESS BONITA SPRINGS FL 33923 24 CITY-ST-ZP DOWNES, THOMAS A 32 STREET ADDRESS AND A 33 STREET ADDRESS AND A 34 CITY-ST-ZP TITLE ADDRESS AND A 34 CITY-ST-ZP TITLE ADDRESS AND A 34 CITY-ST-ZP TITLE ADDRESS AD						nt signati	re required			ID DIRE	CTORS IN 12
OWENS, KEITH R 12 NAME 13 STREET ADDRESS 1825 AROSLEY WAY 13 STREET ADDRESS 13 STREET ADDRESS 14 CITY-ST-ZIP			DIRECTORS					ADDITIONS/CHANGES TO O	TIOCINO AI		
STREET ADDRESS 1825 AROSLEY WAY SANIBEL FL TITLE VP OWENS, THOMAS A STREET ADDRESS 10351 STRIKE LANE OWENS, TROMAS FL 33923 CITY-ST-ZIP BONITA SPRINGS FL 33923 TITLE T OWENS, DAVID A STREET ADDRESS 1854 IBIS LANE STREET ADDRESS 1854 IBIS LANE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STR		•		☐ DEFE15							go
CITY-ST-ZIP	NAME										
TITLE	STREET ADDRESS	1825 AROSLEY WAY			1.3 STREE	TADDRE	SS				
NAME	CITY-ST-ZIP	SANIBEL FL				T-ZIP					Addition
STREET ADDRESS 1035 STRIKE LANE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	TITLE	VP		☐ DELETE	2.1 TITLE		ľ			∐ Cha	nge [_] Addition
CITY-ST-ZIP	NAME.	OWENS, THOMAS A			2.2 NAME						1
TITLE	STREET ADDRESS	10351 STRIKE LANE	• •		2.3 STREE	T ADDRE	SS 🗸 🕝	· · ·			- [
OWENS, DAVID A 3.2 NAME 3.3 STREET ADDRESS SANIBEL FL 33957 3.4 CITY-ST-ZIP Change Addition	CITY-ST-ZIP	BONITA SPRINGS FL 33923			2. 4 CITY-5	ST-ZIP					
STREET ADDRESS 1854 1815 LANE	TiTLE	T		DELETE	3.1 TITLE					☐ Chai	nge ∐ Addition
STREET ADDRESS 1854 1815 LANE	NAME	OWENS, DAVID A			3.2 NAME						
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP CMY-ST-ZIP CMY	STREET ADDRESS				3.3 STREE	T ADDRE	ss				
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP CMY-ST-ZIP CMY	CITY-ST-ZIP	SANIBEL FL 33957			3.4. CITY-	ST-ZIP		•			
NAME		*		DELETE	4.1 TITLE					Cha	nge 🔲 Addition
A3 STREET ADDRESS A4 CITY-ST-ZIP		•	,		4. 2 NAME						ļ
A CITY-ST-ZIP					4.3 STREE	TADDRE	ss				
TITLE	l.										
NAME				DELETE				***		☐ Cha	nge Addition
STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TITLE SAME STREET ADDRESS CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP					B .						
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 5.7 CITY-ST-ZIP NAME 1.0 CITY-ST-ZIP 6.1 TITLE CAMBE 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP					5.3 STREE	TADDRE	ss				
CITY-ST-ZIP DELETE CANAME CANAM					5.4 CITY-S	ST-ZIP					
NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		N. 6.2 Med 32		DELETE			+-	-		Cha	nge Addition
STREET ADDRESS / C /					6.2 NAME					_ : **	
CITY-ST-ZIP 6.4 CITY-ST-ZIP					1	T ADDO	22:				
UIT-51-2P		All Control of the Co					~~				
	CITY-ST-ZIP		this files dee	a mat avalific for th			ted in Sa	action 119 07/3\(ii) Florida Statutes	I further cer	tify that	the information

4. 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, of on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941466-9828