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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # V30727

(4)

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1. Corporation Name

ARCHITECTURAL METAL STRUCTURES, INC.

Principal Place of Business

Mailing Address

5677 COLCORD AVE.
JACKSONVILLE FL 32211

5677 COLCORD AVE.
JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/20/1992

3a. Date of Last Report
06/28/1994

2. Principal Place of Business

2b. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRISSETT, W E JR
4741 ATLANTIC BLVD.
SUITE B-5
JACKSONVILLE FL 32202

81

John M. Swanger

82

Street Address (P.O. Box Number is Not Acceptable)
5277 MAGNOLIA CIRCLE N.

83

84

Jacksonville

FL

85

Zip Code
32211

11. Pursuant to the provisions of Sections 607.05(1) and 607.1508, Florida Statutes, this above-named corporation submits this statement for the purpose of changing its registered office 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. I am familiar with and accept the obligations of Section 607.05(5), Florida Statutes.

SIGNATURE

John M. Swanger

John M. Swanger

1-10-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

SD

NAME

GRISSETT, W E JR

STREET ADDRESS

4741 ATLANTIC BLVD., SUITE B-5

CITY, STATE, ZIP

JACKSONVILLE FL

TITLE

V

NAME

JAUQUET, FRANK D

STREET ADDRESS

3134 DLAHURST DR. W.

CITY, STATE, ZIP

JACKSONVILLE FL 32211

TITLE

PT

NAME

SWANGER, JOHN M

STREET ADDRESS

5277 MAGNOLIA CIR. N.

CITY, STATE, ZIP

JACKSONVILLE FL 32211

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

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STREET ADDRESS

CITY, STATE, ZIP

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SECRETARY, V. P.

FRANK D. JAUQUET

3134 DLAHURST DR W.

JACKSONVILLE, FL 32211

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SIGNATURE:

John M. Swanger

SIGNATURE AND PRINTED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

1-10-95 (904) 721-6669