

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V30727** (4)

1. Corporation Name

ARCHITECTURAL METAL STRUCTURES, INC.



Principal Place of Business

**836 PRUDENTIAL DR.
SUITE 907
JACKSONVILLE FL 32211
US**

Mailing Address

**5677 COLCORD AVE.
SUITE 907
JACKSONVILLE FL 32211
US**

2. Principal Place of Business

2a. Mailing Address

21 **5677 Colcord Ave.**

26 **5677 Colcord Ave.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23 **Jacksonville, FL**

28 **Jacksonville, FL**

Zip

Zip

Country

Country

24 **32211**

25 **USA**

29 **32211**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/20/1992

3a. Date of Last Report

01/17/1995

4. FEI Number

59-3123107

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

10. Name and Address of New Registered Agent

**SWANGER, JOHN M
5277 MAGNOLIA CIRCLE N
JACKSONVILLE FL 32211**

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 607.0503, Florida Statutes.

SIGNATURE

By the Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE **SVP** ☒ DELETE

NAME **JAQUETT, FRANK D**
STREET ADDRESS **3134 DLAHURST DR. W.**
CITY-ST-ZIP **JACKSONVILLE FL**

2. TITLE **PT** ☐ DELETE

NAME **SWANGER, JOHN M**
STREET ADDRESS **5277 MAGNOLIA CIR. N.**
CITY-ST-ZIP **JACKSONVILLE FL 32211**

3. TITLE ☐ DELETE

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