

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

FILED

Feb 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V42812 (0)

1. Corporation Name
SECURE SHUTTERS, INC.

Principal Place of Business

330 MYRTICE AVE
STE. 515
MERRITT ISLAND FL 32953
US

Mailing Address

4270 OVERHILL DRIVE
MERRITT ISLAND FL 32952-6317
US



3. Date Incorporated or Qualified
06/10/1992

3a. Date of Last Report
03/15/1996

2. Principal Place of Business

21 330 myrtice Ave

Suite, Apt. #, etc.
#35

22 City & State
Merritt Island, FL

23 Zip
32953

24 Country
US

2a. Mailing Address

26 4270 Overhill Dr.

Suite, Apt. #, etc.

27 City & State
Merritt Island

28 Zip
32952

29 Country
US

4. FEI Number

59-3134971

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

9. Name and Address of Current Registered Agent

YOUNG, DAVID T.
1227 S. FLORIDA AVENUE
#515
ROCKLEDGE FL 32955

10. Name and Address of New Registered Agent

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 typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MANN, BERNARD S.
STREET ADDRESS 4270 OVERHILL DRIVE
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE VP
NAME OHRT, CHESTER S.
STREET ADDRESS P.O. BOX 468 N/A
CITY-ST-ZIP GRANT FL 32949

TITLE ST
NAME MANN, JOANNE M
STREET ADDRESS 4270 OVERHILL DRIVE
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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, but changed, or on an attachment with an address.

SIGNATURE: *Joanne M Mann* Sec/Tres. 1/31/97 (407) 783-4588
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)