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 # **V50345** **(0)**

1. Corporation Name

CARPENTRY CONTRACTING, INC.

Principal Place of Business	Mailing Address
% ED. G. DELUDE 103 E LAUREN CT FERN PARK FL 32730	% ED. G. DELUDE 103 E LAUREN CT FERN PARK FL 32730

3. Date Incorporated or Qualified: 07/13/1992
3a. Date of Last Report: 06/05/1995

4. FEI Number: 59-3131583 ☐ 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
21 345 E SR 436	26 C/o Philip A Carlin
Suite, Apt. #, etc. 22 Suite 101	Suite, Apt. #, etc. 27 345 E SR 436 Suite 101
City & State 23 Fern Park FL	City & State 28 Fern Park FL
Zip / Country 24 32730 / 25 Seminole	Zip / Country 29 32730 / 30 Seminole

9. Name and Address of Current Registered Agent

'DELUDE, ED. G.
: 103 E LAUREN CT
, FERN PARK FL 32730

10. Name and Address of New Registered Agent

81 Name: Phil A. Carlin
82 Street Address (P.O. Box Number is Not Acceptable): 345 E. SR 436
83 Suite 101
84 City: Fern Park FL 85 Zip Code: 32730

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: Philip A. Carlin — Philip A Carlin — 6/6/96
(Signature, typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when filing by mail) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GELTZ, JAMES L.		1.2 NAME		
STREET ADDRESS	1650 LYNDALE BLVD		1.3 STREET ADDRESS		
CITY-ST-ZIP	MAITLAND FL		1.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RULING, CALVIN,		2.2 NAME		
STREET ADDRESS	1808 CARRIGAN AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME			3.2 NAME	THOMAS RYAN	
STREET ADDRESS			3.3 STREET ADDRESS	4832 Rosemont Dr.	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Orlando FL 32807	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, added or deleted, with an address.

SIGNATURE: James L. Geltz — JAMES L. GELTZ — 6/6/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #