FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V60964 (6)VINYL APPLICATIONS, INC. Principal Place of Business Mailing Address 120 EGLIN PKWY SE 120 EGLIN PKWY SE FT. WALTON BEACH FL 32548 FT. WALTON BEACH FL 32548 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/01/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3141976 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zin Country Country Zin This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 30 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name RAINVILLE, KENT C 120 EGLIN PKWY SE Street Address (P.O. Box Number is Not Acceptable) FT. WALTON BEACH FL 32548 City Zip Code 85 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 farother with, and accept the obligations of Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change 1.1 TITLE TITLE RAINMILLE, KENT C. NAME 1.2 NAME 203 HOLMES BLVD. STREET ADDRESS 1.3 STREET ADDRESS FT WALTON BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE ☐ Addition TITLE 2.1 TITLE RAINVILLE, MICHAEL F NAME 2.2 NAME 203 HOLMES BLVD. STREET ADDRESS 2.3 STREET ADDRESS

NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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, or on an attachment with any address.

2. 4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

□ DELETE

DELETE

DELETE

DELETE

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP TITLE

TITLE

NAME

NAME

TITLE

NAME

TITLE

FT WALTON BEACH FL

RAINVILLE, MIRAM R

203 HOLMES BLVD

FT WALTON BCH FL

5-1-98

850-243-2661

Change

Change

Change

Change

Addition

Addition

Addition

Addition