

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED  
Feb 09 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # V67341 (0)  
1. Corporation Name  
ALUMI-BRITE, INC.



Principal Place of Business  
P.O. BOX 2378  
ORANGE PARK FL 32073

Mailing Address  
P.O. BOX 2378  
ORANGE PARK FL 32073

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

09/29/1992

4. FEI Number

59-3137465

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 owes or has paid the current year intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CLANCE, WAYNE D.  
6353-2 ARGYLE FOREST  
JACKSONVILLE FL 32244

10. Name and Address of New Registered Agent

31 Name

32 Street Address (P.O. Box Number is Not Acceptable)

34 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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
1. HOLDER, DEBBI  
1745 HOWARD CT  
ORANGE PARK FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
2. ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
3. ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
4. ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
5. ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
6. ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. ☐ Change ☐ Addition  
2. ☐ Change ☐ Addition  
3. ☐ Change ☐ Addition  
4. ☐ Change ☐ Addition  
5. ☐ Change ☐ Addition  
6. ☐ Change ☐ Addition

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 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 an address.

CR2E034 (10/97)