

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V70444 (7)
1. Corporation Name
D & D GARAGE DOORS, INC.



Principal Place of Business: **970 CATTLEMEN RD. SARASOTA FL 34240 US 34232**
Mailing Address: **970 COTTLEMEN RD. SARASOTA FL 34240 US 34232**

3. Date Incorporated or Qualified: **10/05/1992**
3a. Date of Last Report: **04/18/1995**
4. FET Number: **65-0364815**
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 (21-24) and 2a. Mailing Address (26-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLER, DALLAS L.
~~989 S PACKINGHOUSE RD~~
SARASOTA FL 34232**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): **970 Cattlemen Rd**
83
84 City: **FL** 85 Zip Code: **34232**

11. Pursuant to the provisions of Sections 607.05-02 and 607.1506, 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: _____ DATE: _____
Signature typed or printed name of registered agent on this page 11B. Registered Agent signature required when registering.

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

12. OFFICERS AND DIRECTORS

1.1 TITLE	P	<input type="checkbox"/> DELETE
1.2 NAME	MILLER, DENVER	
1.3 STREET ADDRESS	16444 DARBY RD.	
1.4 CITY-ST-ZIP	SARASOTA FL	
2.1 TITLE	VT	<input type="checkbox"/> DELETE
2.2 NAME	MILLER, DALLAS L	
2.3 STREET ADDRESS	2701 JAMACIA ST	
2.4 CITY-ST-ZIP	SARASOTA FL 34231	
3.1 TITLE	S	<input checked="" type="checkbox"/> DELETE
3.2 NAME	MILLER, BRIAN	
3.3 STREET ADDRESS	3314 CAMBRIDGE DR	
3.4 CITY-ST-ZIP	SARASOTA FL	
4.1 TITLE		<input type="checkbox"/> DELETE
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> DELETE
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> DELETE
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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, or on an attachment with an address.

SIGNATURE: *Dallas L Miller* **Dallas L Miller VP** **3/5/96 (94) 371-7242**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filed

CR2E034 (12/95)