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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 505287

Corporation Name

CREATIVE BUILDERS OF LAKELAND, INC.

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Principal Place	of Business	Ma	iling Address	_			A LUBRAL BURN DURN DRING THE	IBI IBIN IBN BINI	OIBN OIDN BIBN O	1 3 11 81611 1661
2020 E EDGEW			D E EDGEWOOD DR			1				
OFFICE	OOD DA	_	FICE"							
LAKELAND FL 33809			LAKELAND FL 33803				DO NOT WRITE IN THIS SPACE			
US		US				[7	Date Incorporated or Quali	fed		
						ì	06/16/1976			
2. Principal Pla	ace of Business	2a.	Mailing Address				4. FEI Number		Apı	plied For
21		26					59-1799691			t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	_			5. Certifcate of Status Desired	d 🗆	\$8.75 △	
22		27		_			- Commente di Cialdo Dodino	·	Fee Re	quired
City & State	9		City & State				Election Campaign Financi	ing 🗆	\$5.00	-
23		28					Trust Fund Contribution		Added to	o Fees
Zip	Country	L	Zip	Count	Ŋ		8. This corporation owes the	current year Ir	ntangible	₩
24	25	29		30			Personal Property Tax.			Mν
	9. Name and Address of Curren	nt Regist	ered Agent	_			0. Name and Address of Ne	w Registered	i Agent	
CLE	MAL LADDY F			8	1 Name	LA	RRY E. Gle	nn J	R.	
GLENN, LARRY E.			8	2 Stree	t Address	dress (P.O. Box Number is Not Acceptable)				
2020 E. EDGEWOOD DR.						202	o E Edge	WOOD	DR.	
"OFFICE"			8			3100	O E Edge	Com	alex	
LAKE	ELAND FL 33803			8		114/11	1000 UFFICE	Com	85 Zip (Code
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11. Pursuant t	to the provisions of Sections 607.050	2 and 60	7.1508, Florida Statut	es, the abo	ve-name	d corporat	ion submits this statement for	the purpose of	of changing its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	a. Such change was a	utnonzea b	v tne con	poration's	board of directors. I hereby a	ccept the appu	Jinuneni as reç	gistered
-	1 61 1	1110113 01,	President					1.	-8-00	Į
SIGNATURE	Darry Henry /h.	. , ,							U-77	
0.0	Signature, typed of printed name of registered age	nt and title it		Registered Ag	ent signature	ofw beniupen e		DATE		
12.	Signature, typed of printed name of registered age: OFFICERS AN		applicable (NOTE	Registered Ag	ent signature		ADDITIONS/CHANGES TO	OFFICERS A		
•	Signature, typed of printed name of registered ager		applicable (NOTE			Pres	ADDITIONS/CHANGES TO		ND DIRECTO	RS IN 12
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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 an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Larry E. Glenn, President

941-666-1800 Date

1-8-99

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90220 040 ***150.00

Daytime Phone #

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