FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L97027

(1)

SUNWEST HOMES, INC.

Principal Place of Business

		•	

Mailing Address

FILED Apr 21 1997 8:00am Secretary of State

|--|

7561 CORDOJA CIRCLE P O BOX 8412 NAPLES FL 33941-5412 US		7561 CORDOBA CIRCLE P O BOX 8412 NAPLES FL 34101-8412 US		3. Date Incorporated or Qualified 08/30/1990	3a. Date (leporl		
9 Principal P	lace of Business	2a. Mailing Address		·	4. FEI Number	U-1/10/		polied For	
	CORDOBA CIRcle	— · · · · · · · · · · · · · · · · · · ·	412		65-0221194			ot Applicable	
Sulte, Apt	#, etc.	Suite, Apt. #, etc.	7,0			W \$		Additional	
22		27			5. Cortificate of Status Desired	LL (NL	Fee Re		
City & State 23 NAO	es, Fc	City & State 28 NADles, F	Countr		Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees	
Zip 1 24 34109		Hier							
DAVA	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Reg	Jistered Age	กเ		
	ne, John W. I Cordoba Circle			Name					
	LES FL 33942		82	82 Street Address (P.O. Box Number is Not Acceptable)					
, NAC	LLO 1 L 00842		83	ļ					
				<u></u>			-т		
			84	City		FL I	5 Zip (Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligati	f Florida. Such change was aut	lhorized b	v the corpo	orporation submits this statement for the protection's board of directors. I hereby accept	urpose of ch	anging it ment as	s registered registered	
SIGNATURE									
40	Signature, typed or printed name of registered agent OFFICERS AND		ngistered Ag	ent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE COO AND DI	DECTO	OC 151 40	
12.	D OFFICERS AND	DELETE	1.1 Title		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	PAYNE, JOHN W.	land DECETE	1.2 NAME				Unlango		
STREET ADDRESS	7561 CORDOBA CIRCLE		1	I ADDRESS					
CITY-ST-ZIP	NAPLES FL		1.4 CITY-5					ļ	
TITLE	D	DELETE	2.1 1111.6				Change	Addition	
NAME	SCHEINHOLZ, IVY		2.2 NAME						
STREET ADDRESS	7822 COCO BAY CT		2.3 STREET	ADDRESS	- ,				
CITY-ST-ZIP	NAPLES FL		2 4 CHY-	ST-7IP					
TITLE	D	☐ DETELE	31 TALE				Change	Addition	
NAME	SCHEINHOLZ, ARTHUR		3.2 NAME						
STREET ADDRESS	7822 COCO BAY CT		3.3 STREE	ADDRESS					
CITY-ST-ZIP	NAPLES FL	Driete	3.4. CITY -	S1-20°			Ohana	A dept.	
TITLE		☐ DETEL€	4.1 TITLE			L	Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - S 5.1 TITLE	51-712			Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 City-	ì					
TITLE		DELETE	6.1 TITLE				Change	Addition	
NAME	7.04		6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			6.4 City -	S1 - ZIP					

14. I do hereby certify that the information supplied with this filling 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 logal 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 open attachment with an address.

IONATION. O ASIGNACIA CALCINISTA