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PROFIT CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$69935

(2)

VINTAGE DEVELOPERS, INC.

Principal Place of Business Mailing Address 6875 ULMERTON ROAD 6875 ULMERTON ROAD LARGO FL 34641 LARGO FL 33771-4945 3. Date Incorporated or Qualified 3a. Date of Last Report 07/26/1991 04/22/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3075400 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALLEN, LEROY R. **6875 ULMERTON ROAD** Street Address (P.O. Box Number is Not Acceptable) LARGO FL 34611 83 84 Zip Code City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change ☐ Addition MILE STEFAN, TIMOTHY 1.2 NAME NAME **6875 ULMERTON ROAD** STREET ADDRESS 1.3 STREET ADDRESS LARGO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE WALSH, PATRICK J. 2.2 NAME NAME 113 7TH ST. E. STREET ADDRESS 2.3 STREET ADDRESS TIERRA VERDE FL 2. 4 CITY-ST-ZIP CITY - ST - ZIF DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREEL ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY - S1 - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STHEET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with his 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 frustee employeed 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.