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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State 'DIVISION OF CORPORATIONS

DOCUMENT # 397557

CARAVEL HOMES OF FLORIDA, INC

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90090 027 ***150.00



		84-91 8-44							JALUA WARRA LADA A		II GIUU DI	INA BINIL LUNI
Principal Place of Business Mailing Address						ļ						
8735 GRASSY ISLE TRAIL 8735 GRASSY ISLE TRAIL						1						
LAKE WORTH F	L 33467	US	LAKE WORTH FL 33467				DO NOT WRITE IN THIS SPACE					
US		U o				F	3. Date Incorporated or Qualifed					
							03/16/19	_				
2. Principal Place of Business 2a. Mailing Address							4. FEI Number				App	olied For
	ado of Baometo	26					59-1382788			Not	Applicable	
Suite, Apt.	# etc		Suite, Apt. #, etc.							\$8	3.75 A	dditional
22	,, , ,,,	<u>⊢</u>	27				5. Certifcate of	f Status Desir	red 🔲	•	Fee Re	quired
City & State		City & State					6. Election Ca	mpaign Finar	ocina	\$	5.00	May Be
23		28				-	Contribution			Added to		
Zip	Country	Zip Country					8. This corpor	ation owes the	e current vea	ar Intangib	le	
24	25			1			Personal Property Tax.					
24]	9. Name and Address of Currer	177	100				10. Name and		New Registe	red Agen	1	
				81	Name						_	
RASI	KIN, IRWIN			_			(5.0.5.11	in a a la Niad A	toble)			
8735 GRASSY ISLE TRAIL				82 Street Add			ddress (P.O. Box Number is Not Acceptable)					
LAKE			83									
				84	City					FL 85	Zip C	ode
44 Durauant	to the provisions of Sections 607.050	2 and 607 1508 Florida Stati	ites the al		-named	comora	tion submits thi	s statement fo	or the purpos	se of chang	ging its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized	by 1	tne corpo	oration's	board of direc	tors. I hereby	accept the a	appointmer	it as reg	jistered
SIGNATURE	•											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R					stered Agent signature required when reinstating)					FFICERS AND DIRECTORS IN 12		
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS	CHANGES I	OUFFICER		Change	Addition
TITLE	PD	☐ DELETE	1.1 Ⅲ								riange	
NAME	RASKIN, IRWIN		1.2 NA	ME								
STREET ADDRESS 8735 GRASSY ISLE TRAIL			1.3 \$		1.3 STREET ADDRESS							
CITY-ST-ZIP	LAKE WORTH FL		1.4 CF		-ZIP					<i>⊆</i> 7.	N	T Addition
TITLE	VD	_		2.1 TITLE						X	Change	Addition
NAME	raskin, deborah R.				.2 NAME		280-4	ew a	1 8000	AAE		
STREET ADDRESS	13391-D SW 91ST TERR	•	2.3 ST	3 STREET ADDRESS		13.	380-A	30.7	/ IERK	MUE		
CITY-ST-ZIP	MIAMI FL		2 4 C	4 CITY- ST-ZIP		MIL	HI, FL	30/80	<u>ص</u>			
TITLE	/SD □ DELETE		3 1 TF	31TMLE							Change	☐ Addition
NAME	RASKIN, SHARON L.		3.2 NA	ME								
STREET ADDRESS	8735 GRASSY ISLE TRAIL		3.3 \$		3 STREET ADDRESS							
CITY-ST-ZIP	LAKE WORTH FL		3.4. CITY-		T-ZIP							
TITLE		☐ DELETE	4.1 TI	ΠE							Change	☐ Addition
NAME			4. 2 N	AME								
STREET ADDRESS			4.3 ST	REET	ADDRESS							
CITY-ST-ZIP			4.4 CI	TY-\$1	r- ZIP							
TITLE		☐ DELETE	5.1 TT	TLE		1					Change	☐ Addition
NAME			5.2 NA									
STREET ADDRESS			5.3 \$7	REET	ADDRESS							
CITY-ST-ZIP			5.4 CI	TY-S1	r-ZIP							
TITLE		☐ DELETE	6.1 TI								Change	Addition
NAME	a see a see a see a see	_	6.2 N	ME								
			6.3 S1	REET	ADDRESS							
STREET ADDRESS						1						

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.

RASKIN

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR