2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 397557 1. Entity Name CARAVEL HOMES OF FLORIDA, INC					A_1	Apr 06, 2006 08:00 AM Secretary of State			
Principal Place of Business		Mailing Address		1					
8735 GRASSY ISLE TRAIL LAKE WORTH FL 33467 US		- 8735 GRASSY ISLE TRAIL LAKE WORTH FL 33467 US							
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			T THE TOWN THE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			st MOORE	CR2E034	(10/05)		
City & State		City & State	City & State		4. FEI Numi	59-138278	 3	- - -	Applied For
Zip Country		Zip	Zip Country		5. Certificat	5. Certificate of Status Desired S8.75 Add Fee Require			Not Applica dditional
6. Name an	d Address of Current	Registered Agent			7. Name an	d Address of New F	egistered .		100
				Name					
RASKIN, IRWIN 8735 GRASSY I LAKE WORTH F	SLE TRAIL			Street Address	s (P.O. Box Numb	per is Not Acceptable	a)		
				City			FL	Zip Co	ede
The above named entity su the obligations of registered		or the purpose of changing	its register	ed office or regist	ered agent, or b	oth, in the State of Fk	xida. I am	familiar will	h, and acco
SIGNATURESignature, typed ox pri	illed nume of registered agent	and title if applicable (if	NOTE Registare	d Agent signalura roqui	ed when remstate(g)		DATE		
FILE NOW!!! F After May 1, 2006 F Make Check Payable to Fl	ee Will Be \$550.00			÷	•	9. Election Campo Trust Fund Cor	_	<u> </u>	5.00 May ded to Fee
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/ CHANGES TO OFF	CERS AND	DIRECTO	RS IN 11
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NAME RASKIN, IRWII			MAM	- 1		Unan			
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12. I hereby certify that the inf			UDY-	- זוב-נפי					

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental teport 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 direction 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 10 or Block 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

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(561) 967-6992

FILED