

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 402960 (9)
1. Corporation Name
FLORIDA SUN BUILDERS, INC.

Principal Place of Business Mailing Address
4049 DUNN DR SARASOTA FL 34233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/12/1972	3a. Date of Last Report 04/22/1994
4. FEI Number 59-1400944	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. This corporation has liability for intangible tax under C. 109.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent

**DOERR, WILLIAM H
4049 DUNN DR
SARASOTA, FL
34233**

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
FL 05 Zip Code

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 their address)

(Signature: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	DOERR, WILLIAM H.	12 NAME	
STREET ADDRESS	4049 DUNN DRIVE	13 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	14 CITY, ST, ZIP	
TITLE	VT	21 TITLE	☐ Change ☐ Addition
NAME	BOOTH, B C	22 NAME	
STREET ADDRESS	S. GULFSTREAM AVENUE	23 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	24 CITY, ST, ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	SKALITZKY, ROBERT	32 NAME	
STREET ADDRESS	1229 N. GULFSTREAM AVE.	33 STREET ADDRESS	
CITY, ST, ZIP	SARASOTA FL	34 CITY, ST, ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), 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.

SIGNATURE: *William H. Doerr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM H. DOERR

4/10/95 (813)371-6472
Date Signature