

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

**APPROVED
AND
FILED**

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mathman Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 597183 1. Corporation Number	(3)
B.W. HOMES, INC.	

1. Principal Office of Corporation % ANN WETTLIN 849 S FEDERAL HWY DEERFIELD BEACH FL 33441	2. Mailing Address % ANN WETTLIN 849 S FEDERAL HWY DEERFIELD BEACH FL 33441
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2. Principal Office of Director 21	2a. Mailing Address 26
State App # 01 22	State App # 01 27
City & State 23	City & State 28
24	25 26 27 28 29 30

3. Date Incorporated or Quoted 12/07/1978	3a. Date of Last Report 05/01/1994
4. FEI Number 59-277089 59-2308199	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
7. Does corporation have liability for a foreign tax under the provisions of the Florida Statutes? ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent BLOOMGARDEN, PAUL M. 800 E. BROWARD BLVD., SUITE 408 FORT LAUDERDALE, FL MH	
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10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (If no Box Number, Not Applicable)	
83.	
84. City	FL 85. Zip Code

11. I, the undersigned, being a resident of the State of Florida, and being 18 years of age or over, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and that the above named corporation is authorized by its board of directors to file this report and to pay the applicable fees required by the Florida Statutes.

Signature of Officer or Director: _____ Date: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
NAME: PD WETTLIN, HERBERT BROOKS 849 S FED HWY DEERFIELD BEACH FL	1. NAME: ☐ Change ☐ Addition
NAME: P WETTLIN, ANN C. 849 S FED HWY DEERFIELD BEACH FL	2. NAME: ☐ Change ☐ Addition
	3. NAME: ☐ Change ☐ Addition
	4. NAME: ☐ Change ☐ Addition
	5. NAME: ☐ Change ☐ Addition
	6. NAME: ☐ Change ☐ Addition
	7. NAME: ☐ Change ☐ Addition
	8. NAME: ☐ Change ☐ Addition
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	13. NAME: ☐ Change ☐ Addition
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	15. NAME: ☐ Change ☐ Addition
	16. NAME: ☐ Change ☐ Addition
	17. NAME: ☐ Change ☐ Addition
	18. NAME: ☐ Change ☐ Addition
	19. NAME: ☐ Change ☐ Addition
	20. NAME: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct, and that the corporation is duly organized under the laws of the State of Florida, and that the above named corporation is authorized by its board of directors to file this report and to pay the applicable fees required by the Florida Statutes.

SIGNATURE: *Ann C. Wetlin*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-95 305-3463663