SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CITY-ST-ZIP

Jul 22 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # 680100 (5)HOMES BY SHERLOCK, INC. Principal Place of Business Mailing Address 1133 BAL HARBOR BLVD 1133 BAL HARBOR BLVD **SUITE 1129 SUITE 1129** DO NOT WRITE IN THIS SPACE **PUNTA GORDA FL 33950** PUNTA GORDA FL 33950 3. Date Incorporated or Qualified 3a. Date of Last Report 07/29/1980 03/07/1996 2. Principal Place of Business Applied For 2a. Mailing Address FEI Number 21 Not Applicable 26 59-2024629 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes ☐ No 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PETCHE, JAMES 1133 BAL HARBOR BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1129** 83 **PUNTA GORDA FL 33950** City 84 85 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 horeby 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. CR2E034 (4/97 Y Change **PSD** DELETE 1.1 TITLE TITLE PETCHE, JAMES M 12 NAME NAME 22187 LOCKPORT AVE STREET ADDRESS 1.3 STREET ADDRESS PT CHARLOTTE, FL 00000 1.4 C(1Y-\$1-ZIP Change CITY-ST-ZIP PT CHARLOTTE, FL 3395 DELETE Addition TITLE 2.1 1006 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Change 3.1 THLE Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. City - S1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STRELT ADDRESS STREET ADORESS

64 CITY-ST-7IP 14. I do hereby certify that the information supplied with this filing does not quality 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.

7/11/900 111 120 00

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