

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 02, 1999 8:00 am
Secretary of State

08-02-1999 90012 040 ****61.25

DOCUMENT # 704354

1. Corporation Name

THE HOME BUILDERS ASSOCIATION OF SARASOTA, INC.

Principal Place of Business

5590 BEE RIDGE RD
STE. A-1
SARASOTA FL 34233

Mailing Address

5590 BEE RIDGE RD
STE. A-1
SARASOTA FL 34233



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

07/31/1962

4. FEI Number

59-1001688

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. Name and Address of Current Registered Agent

WALWIK, WILLIAM
5590 BEE RIDGE RD
STE. A-1
SARASOTA FL 34233

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KING, JOHN
STREET ADDRESS 5590 BEE RIDGE RD A-1
CITY-ST-ZIP SARASOTA FL 34233

☒ DELETE

TITLE VPD
NAME CANNON, JOHN
STREET ADDRESS 5590 BEE RIDGE RD, A-1
CITY-ST-ZIP SARASOTA FL 34233

☒ DELETE

TITLE TD
NAME PAULMANN, JIM
STREET ADDRESS 5590 BEE RIDGE RD, A-1
CITY-ST-ZIP SARASOTA FL 34233

☒ DELETE

TITLE SD
NAME HARRISON, REX
STREET ADDRESS 5590 BEE RIDGE RD, A-1
CITY-ST-ZIP SARASOTA FL 34233

☒ DELETE

TITLE DEVP
NAME WALWIK, WILLIAM
STREET ADDRESS 5590 BEE RIDGE RD A-1
CITY-ST-ZIP SARASOTA FL 34233

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

President ☒ Change ☐ Addition

James Paulmann
5590 Bee Ridge Rd, A-1
Sarasota, FL 34233

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Vice President ☐ Change ☒ Addition

Thomas A. Gilmore
5590 Bee Ridge Rd, A-1
Sarasota, FL 34233

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Treasurer ☐ Change ☒ Addition

Jeff Eslinger
5590 Bee Ridge Rd, A-1
Sarasota, FL 34233

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Secretary ☐ Change ☒ Addition

Ted Brase
5590 Bee Ridge Rd, A-1
Sarasota, FL 34233

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 617, 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.

SIGNATURE:

SIGNATURE WILLIAM WALWIK

7/27/99

9413793306

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/99)