

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -8 PM 3:49

DOCUMENT # 830923

(9)

1. Corporation Name

TAYWOOD HOMES LIMITED (INC.)

Principal Place of Business

**1900 LONG MEADOW
SARASOTA FL 34235**

Mailing Address

**1900 LONG MEADOW
SARASOTA FL 34235**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/26/1973

3a. Date of Last Report

03/24/1994

4. FEI Number

59-1485662

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**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 7120 S. Beneva Road

Suite, Apt. #, etc.

22

City & State

23 Sarasota, FL

Zip

24 34238

Country

25 USA

2a. Mailing Address

26 7120 S. Beneva Road

Suite, Apt. #, etc.

27

City & State

28 Sarasota, FL

Zip

29 34238

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TAYLOR WOODROW HOMES FLA. INC.
C/O KATHRYN B. CLAYTON
1900 LONGMEADOW
SARASOTA FL 34235**

81 Name

82 7120 S. Beneva Road

83

84 City Sarasota, FL

FL

85 Zip Code 34238

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	SAYERS, A.C.
STREET ADDRESS	24 HUNTSMAN MEADOW
CITY-ST-ZIP	BERSHIRE, ENG
TITLE	D
NAME	SAUNDERS, JOHN O.
STREET ADDRESS	FOXLEY LANE
CITY-ST-ZIP	BINFIELD, BRACKNELL, E
TITLE	JOHN R. PESHKIN ASST. SEC.
NAME	7120 S. Beneva Road
STREET ADDRESS	Sarasota, FL 34238
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SD	☒ Change ☐ Addition
1.2 NAME	Roy Ellis FCMA c/o Taywood Homes Ltd.	
1.3 STREET ADDRESS	Greenham Park House	
1.4 CITY-ST-ZIP	Chertsey Road, Feltham, Middlesex TW13 4RW	
2.1 TITLE	c/o Taywood Homes Ltd.	☒ Change ☐ Addition
2.2 NAME	Greenham Park House	
2.3 STREET ADDRESS	Chertsey Road, Feltham, Middlesex TW13 4RW	
2.4 CITY-ST-ZIP		
3.1 TITLE	JOHN R. PESHKIN ASST. SEC.	☐ Change ☒ Addition
3.2 NAME	7120 S. Beneva Road	
3.3 STREET ADDRESS	Sarasota, FL 34238	
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John R. Peshkin

(813) 927-0999

Date

Signature (Printed)

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34238

Country

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1900 LONGMEADOW
SARASOTA FL 34235

10. Name and Address of New Registered Agent

81 Name

82 Street Address (Do Not Leave Blank or Inacceptable)

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3.1 TITLE	
3.2 NAME	JOHN R. PESHKIN ASST. SEC.
3.3 STREET ADDRESS	7120 S. Beneva Road
3.4 CITY-ST-ZIP	Sarasota, FL 34238
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John R. Pashkin

Date

(813) 927-0999

(Area 1 (Area 2))