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 FEB 21 AM 9:25

DOCUMENT # **844770** **(8)**

1. Corporation Name
LAN RON BUILDERS, INC.

Principal Place of Business	Mailing Address
23041 AVENIDA DE LA CARLOTA.STE.175 LAGUNA HILLS CA 92653	23041 AVENIDA DE LA CARLOTA.STE.175 LAGUNA HILLS CA 92653

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/06/1979	3a. Date of Last Report: 03/21/1994
2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)
4. FEI Number: 95-2819187	☐ 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	

9. Name and Address of Current Registered Agent

PINE LAKES/G. SCOTT BROWN
10200 PINE LAKES BOULEVARD
NORTH FORT MYERS 33903

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 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 _____ DATE
(Signature required if petitioner is registered agent and box 8 is checked) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	BROWN ,GROVER CO JR	1.2 NAME	
STREET ADDRESS	1121 EMERALD BAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA BCH, CA 00000	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, ROBERT D	2.2 NAME	
STREET ADDRESS	5727 INVERNESS CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NO FT MYERS, FL 00000	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, G. SCOTT	3.2 NAME	
STREET ADDRESS	27562 ESCUNA	3.3 STREET ADDRESS	
CITY-ST-ZIP	MISSION VIEJO CA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, STEPHEN A.	4.2 NAME	
STREET ADDRESS	30171 HILLSIDE TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	SANJUAN CAPISTRANO CA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 with changes or on an attachment with an address.

SIGNATURE: G. Scott Brown 2/15/95 (813) 731-5565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (714) 583-1155 (Area Code & Phone #)

G. SCOTT BROWN

0402425 FP