

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 FEB 22 AM 11:02

DOCUMENT # F27706 (3)

1. Corporation Name
LEE WETHERINGTON HOMES, INC.

Principal Place of Business 7711 HOLIDAY DRIVE SARASOTA FL 34231	Mailing Address 7711 HOLIDAY DRIVE SARASOTA FL 34231
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/01/1981	3a. Date of Last Report 04/12/1994
21		26		4. FEI Number 59-2078021	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
22		27		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DUMBAUGH, JOHN D. 1900 RINGLING BLVD. 1100 SARASOTA PLAZA 34236				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

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	WETHERINGTON, LELAND C	1.2 NAME	
STREET ADDRESS	7711 HOLIDAY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☒ Change ☐ Addition
NAME	GRAY, CECILIA	2.2 NAME	V.P. and Secretary Cecilia Davis
STREET ADDRESS	7711 HOLIDAY DR.	2.3 STREET ADDRESS	7711 Holiday Drive
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Sarasota, FL 34231
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	SCHUBRING, MICHAEL	3.2 NAME	
STREET ADDRESS	7711 HOLIDAY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-95
Date

(013) 922-5480
Telephone