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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # **F76203** 

(1)

| Principal Place<br>C/O JACOUI<br>1200 EMBER<br>MARCO ISLA  | FORD CUSTO  P of Business ELINE M. FORD CT IND FL 33937-5703 | M BUILDERS,  | Mailing Address  % JACQUELINE M. FORD 1200 EMBER CT MARCO ISLAND FL 33937  |  |  |  |   |                               |                                   |                           |                     |                        |                                    |   |
|--|--|--|--|--|--|--|---|-------------------------------|-----------------------------------|---------------------------|---------------------|------------------------|------------------------------------|---|
| US   |  |  | US   |  |  |  |   | 3. Da                         | le Incorpora<br>14/13/198         | ted or Qua<br><b>2</b>    | alified             | 3a. Dal<br>0           | te of Last<br>4/19/19              | Report<br>195                                 |
| . Principat Pl   | ace of Business  |  | 2a. Mailing A  | ddress   | · · · - · · · · · · · · · · · · · · · ·  |  |   | 4. FE                         | Number<br><b>59-2193</b> 9        | 993                       |                     |                        |                                    | Applied For<br>Not Applicat                   |
| Suite, Apt   |  |  | Suite, Ap  | t.#, etc.                                      |  |  |   | <b>5.</b> Ce                  | ertificate of St                  | latus Desir               | ed                  |                        |                                    | 5 Additional<br>Required                      |
| City & State   |  |  | City & Sta   | ate  |  |  |   |                               | ection Campa<br>est Fund Con      | •                         | ing                 |                        |                                    | 00 May Be<br>ed to Fees                       |
| Ζφ<br>   |  | Country  | Zip  |  | Countr   | ry   |   |                               | is corporation                    |                           |                     |                        |                                    |   |
| 1  | [25]   | Address of Currer  | 29   |  | 30   |  |   |                               | rida Statutes                     |                           | Yes                 |                        |                                    |   |
|  | g. Hame and )  | namess of Currer   | riegistereu Age  |  | 81   | 1 N  | lame .                                    | 10, NE                        | ame and Ad                        | uress OI (                | New He              | Aisteled               | Agent                              |   |
| FORD, JACQUELINE M<br>1200 EMBER CT<br>MARCO ISLAND FL 33937   |  |  |  |  |  |  | dress (P.O. Box Number is Not Acceptable) |                               |                                   |                           |                     |                        |                                    |   |
| 112 (1100  | 100 110 12 000   | <b>9</b> 1   |  |  | 6.   | 3  |   |                               |                                   |                           |                     |                        |                                    |   |
|  |  |  |  |  | 84   | 4 0  | ity                                       |                               |                                   |                           |                     | FL                     | 85 2                               | ip Code                                       |
| or register<br>famil ar wi   | red agent, or both,<br>In, and accept the                    | in the State of Flori<br>obligations of, Sect  | 2 and 607,1508, Flo<br>da. Such change w<br>tion 607,0505, Flori   | orida Statute<br>vas authorize<br>ida Statutes | es, the above-<br>ed by the corp<br>s.   | -nam<br>porat  | ed corpo<br>tion's boa                    | oration subm<br>and of direct | nits this state<br>tors. I hereby | ement for ti<br>accept th | he purp<br>le appoi | ose of ch<br>ntment as | s registere                        | d agent. I am                                 |
| or register<br>famil ar wi<br>IGNATURE<br>2.   | m, and accept the  | obligations of Floricobligations of, Sections of Rections of Sections of Sections of Republications of Sections and Sections of Sections o | ion 607.0505, Flori<br>tand the Lappisal能  | ioa Statutes.                                  | es, the above-<br>ed by the con<br>it. Registeres Ap.<br>113.  |  |   | ed when rensta                |                                   |                           |                     | DĀTĒ                   |                                    |   |
| GNATURE  | Signature, typed or ponte                                    | colligations of, Sect<br>dinable of registered agent   | tand the Tappication   | ioa Statutes.                                  | i.<br>DE: Begistered Ayo   | ent sign   |   | ed when rensta                | Prej                              |                           |                     | DĀTE<br>DĒRS ANI       |                                    | ORS IN 12                                     |
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| SINATURE   | Signature, typed or protect PFORD, PAUL 1200 EMBER           | Onligations of, Section of name of repetitive agent OFFICERS AND   | tand the Tappication   | NO   | ITE: Begistered Apr<br>13.<br>1. 1 TILLE   | ont sign   | Calate Perpere                            | ed when relista               | Prej                              |                           |                     | DĀTE<br>DĒRS ANI       | D DIRECT                           | ORS IN 12                                     |
| SATURE  CANATURE  LE  ME  ME  MEH ADDRESS  Y-SE-789  | Signature, typed or protect PFORD, PAUL 1200 EMBER           | obligations of, Sect<br>dinancial registered agent<br>OFFICERS ANI   | rand too Tayvicalৰ<br>D DIRECTORS  | OA Statutes.                                   | 13. 1.1 THE 1.2 NAME 1.3 STREE 1.4 CITY  | ent sign<br>ET ADU<br>ST-ZiF   | naturo respone                            | ed when relista               | Prej                              |                           |                     | DĀTE<br>SERS AND       | O DIRECTI<br>☐ Change              | ORS IN 12                                     |
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SIGNATURE: Paul Ford PAUL FORD PRES. 4/9/96 941-394-5787
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

Dayling Prints I