## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # F9300001567 (7) QUAILMARK HOMES, INC.										
Principal Place of Business Mailing Address									T TORTION WIND TAINS THAIL BRIND BRI	
4500 EXECUTIVE DRIVE SUITE 110 NAPLES FL 34119 US				SUITE 11	4500 EXECUTIVE DRIVE SUITE 110 NAPLES FL 34119 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/30/1993	
2.	Principal Place of Business 2a. Mailing				g Address				4. FEI Number Applied For	
21	1			26	4				65-0395627 Not Applicable	
	Suite, Apt. #, etc.			_ <del>                                    </del>	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22	2 City & State			27 City 8	City & State				Fee Required	
23	Ony a State				28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
20	Zip	Country			Zip Country				This corporation owes or has paid the current year Intangible	
24			25	29		30	ĺ		Personal Property Tax due June 30. X Yes No	
		9. Name	and Address of Currer	t Registered A	gent				10. Name and Address of New Registered Agent	
l	CO	<b>RPO</b> RATIO	N SERVICE COMPAN	Υ			81	Name	e	
1201 HAYS STREET TALLAHASSEE FL 32301							82	Street	et Address (P.O. Box Number is Not Acceptable)	
							83			
		7					В4	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes office or registered agent, or both, in the State of Florida, Such change was au agent. I am femiliar with, and accept the obligations of, Section 607.0505, Flori							ooved by	e-named the cor	ed cornoration submits this statement for the nurpose of changing its registered	
SIGNATURE									ure required when reinstating) DATE	
12	ì.		OFFICERS AN	D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TIT	u ļ	PSTD			DELETE	1.1 10	TLE		Change Addition	
NA	···-		, THOMAS G			1.2 NA	ME			
I	REET ADORESS		ECUTIVE DRIVE			1.3 ST	AEET	ADDRESS	\$	
_	Y-ST-ZIP		FL 34119		DELETE	1.4 Cf		37 - ZIP	<b>V</b> Change	
TIT NAI	- 1	VS	ICAL IEEEDEV A		☐ DELETE	2 1 TH			TE Change LI Abbillion	
	REET ADDRESS		IEN, JEFFREY A ILL RUN CIRCLE			2.2 NA		ADDRESS	, ]	
l	Y-ST-ZIP	NAPLES						ADURESS ST-ZIP	Naples, FL 34109	
TIT		V	· • •	············	DELETE	3.1 10		- LII	Change Addition	
NAI	1	HOUSE	R, JAMES F			3.2 NA				
STF	REET ADDRESS		ECUTIVE DRIVE, SUI	TE 110		3.3 \$1	REET	ADDRESS	s	
Cit	Y-ST-ZIP		FL 34119			3.4. CI	TY-S	ST-ZIP		
TIT	LE				DELETE	4.1 10			☐ Change ☐ Addition	
NA	ME [					4. 2 N/	AME			
STR	REET ADDRESS					4 3 ST	HEET	ADDRESS	s	
1	Y-ST-ZIP				T process	4.4 CI		T - ZIP		
TIT	J				DELETÉ	5.1 TIX			☐ Change ☐ Addition	
NW CT						5.2 NA		1000000		
	REET ADDRESS							ADDRESS		
TIT	Y-ST-ZIP LE			- <del></del>	DELETE	5.4 CI		1 - 211	Change Addition	
NAJ					المامر ر	6.2 NA			Consign England	
	REET ADDRESS							ADDRESS	,	
Ī	Y-ST-7IP					1		T-7/P	·	

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 expowered 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.

**FILED** 

May 01 1998 8:00am

Secretary of State