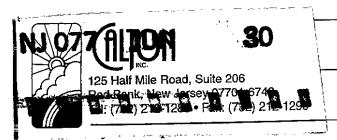
## G52177



FORMULE PROPERTY FOR THE PROPERTY PROPE

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

	1	Corporation Name)	Фос	ument #)	<del></del>		
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	2(C	Corporation Name)	(Döc	- 197	_		
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	4. (Corporation Name)  (Corporation Name)		(Дос	-1	<del></del> .	ME E.	
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	(C	Lorporation Name)	(Doc	ument #)	LAH CKE	<u>_</u>	
	☐ Walk in	Pick up time		Certified Copy	NSSE ASSE	JUL -6	-
	Mail out	☐ Will wait	Photocopy	Certificate of Status	Y OF SI	PM 2: 04	
	NEW FILINGS	AMENI	DMENTS		ATE	40	
	Profit	Amendme	nt				
	NonProfit Resignation		n of R.A., Officer/ Director				
	Limited Liability	Change of	Registered Agent			-	
	Domestication	Dissolutio	m/Withdrawal		-		
	Other	Merger				-	
. <del></del>				053000 0000 0000 0000 0000 0000 0000 00	۹		
	OTHER FILING	The state of the s	ISTRATION/ DIFICATION	V. /	' '		
	Annual Report		EIR/CATTON SE	3/			
	Fictitious Name	Foreign		BUN,			
	Name Reservation	Limited P	artnership				
		Reinstate	ment				
		Trademar	k				

Other

CR2E031(1/95)

Examiner's Initials

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	rovisions of sections 60 oration organized unde	•	•	•	Florida Sta	itutes, the				
<b>1</b>	ving statement in order				agent, or bo	oth, in the				
State of Florida.										
1. The name of th	e corporation is:	Calton Hor	mes of Flo	rida, Inc.	•					
2. The mailing ad	dress of the corporation	n is: 12!	5 Half Mil	e Road, Si	uite 206					
		Red	d Bank, Ne	w Jersey	07701-6	749				
3. Date of incorp	oration/qualification: _ <b>{</b>	<b>3/1/</b> 83	Docu	ment number:	G52177	(4)				
4. The name and a	address of the current re	egistered agent	t and office:							
	Marcus Watter:	۹.								
				10	î e e lek le . L					
. —	380 S. Northl	ake Bivo.	, Suite 10	12	*					
Altamonte Springs, FL 32701  5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)										
	Anthony J. Ca	ldarone			والإستعادات					
_	162 Anchor Dr				P.SE	99				
	Vero Beach, F	L 32963		<del></del>	AHA AHA	E T				
	s of its registered officil, will be identical.									
Such change was authorized by the	authorized by resolut board.	ion duly adop	ted by its boar	d of directors	or by an off	icer so				
[///bl	Lave			6/2	8/9美	40				
Signature of	an officer, chairman or vice	chairman of the l	poard)	(	(Date)					
Anthony J. Co	aldarone, Direc (Printed or typed name a	tor and Pind title)	resident			t				
corporation, I he I further agree to	ned as registered agen reby accept the appoir comply with the prov ny duties, and I am fan	ntment as regi isions of all si	istered agent a tatutes relative	nd agree to ac to the proper	ct in this cap and comple	pacity. ete				
Med	leve			6/28	/99					
(Sig	nature of Registered Agent)		, , , , , , , , , , , , , , , , , , , ,	(Date)						
If signing on behalf	•									
Anthony J. (Ty	Caldarone ped or Printed Name)	Rêgister	ed Agent,	President (Capacity)		<u>tor</u>				
` •	-									

\* \* \* FILING FEE: \$35.00 \* \* \*