

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # H11294	
1. Entity Name FLORIDA HOMES AND LAND INCORPORATED OF VOLUSIA COUNTY	
Principal Place of Business 506 N RIDGEWOOD AVE EDGEWATER, FL 32132 US	Mailing Address 200 N RIVERSIDE DR EDGEWATER, FL 32132 US



04072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2428161	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	

6. Name and Address of Current Registered Agent

HAUGHWOUT, LESLIE C
200 N RIVERSIDE DR
EDGEWATER, FL 32132

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when re-listing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HAUGHWOUT, C. LESLIE 200 N RIVERSIDE DRIVE EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HAUGHWOUT, JEAN 200 N RIVERSIDE DRIVE EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HAUGHWOUT, KENNETH L. 2640 23RD AVE. N.E. HICKORY, NC 28601
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HAUGHWOUT, E. ROBERT 123 RIO VISTA EDGEWATER, FL 32132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

UN00000297135
04/11/05-80016-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Leslie C. Haughwout

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/05

Date

(386)428-1810

Daytime Phone #

Leslie C. Haughwout