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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # H15752

1. Corporation Name SUBESIDE HOMES, INC.

JUNI	JIDL	LICINICO	111

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90184 009 ***150.00

								;
Principal Place	e of Business	Mailing Address			E IMMERII SION EIRMI MAINI IOMAN MIENI	D 1181 BIBIT BIBIT BEBIT BIBI	(818t) WINH 1881	i
13133 PROFESS	SIONAL DRIVE	13133 PROFESSIONAL DRIV SUITE 100	E					
JACKSONVILLE		JACKSONVILLE FL 32225		. 1	DO NOT WRITE	E IN THIS SPACE		_
US		us			3. Date incorporated or Qualifed 08/03/1984		,	-
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26		- 1	59-2430689		Not Applicable	€
Suite, Apt.	#, etc	Suite, Apt. #, etc.			- Cartifornia of Status Booking		Additional	
22		27			5. Certifcate of Status Desired	Fee S	Required	
City & State	e	City & State			6. Election Campaign Financing	1 1	May Be	ĺ
23		28			Trust Fund Contribution	Added	to Fees	_
Zip	Country	Zip	Country		This corporation owes the current		-	
24	25		30		Personal Property Tax.	☐ Yes	☑No	
ļ	9. Name and Address of Curre	nt Registered Agent	81 Nam		10. Name and Address of New Re	egisterea Agent		\dashv
SARA	ATIER, LOUIS		Si Naii	10				╛
	3 PROFESSIONAL DRIVE		82 Stre	et Addres	ss (P.O. Box Number is Not Acceptate	ole)		\ \
	E 100		83					┥ .
_	KSONVILLE FL 32225		65		_			_
0,101	MOOTH LEE I D CLLLS		84 City			FL 85 Zi	Code	
L	40.007.007.00	00 - J 607 4509 Florido Statuto	a the shows pare	od comor	ation submits this statement for the p		ts registered	
diffice or r	registered agent or both in the State	e of Florida. Such change was au	ithonzed by the co	rporation	's board of directors. I hereby accept	the appointment as	registered	}
agent. I a	im familiar with, and accept the oblig	ations of, Section 607.0505, Flori	ida Statutes.					
SIGNATURE	Stanature, typed or printed name of registered ag	ent and title if applicable (NOTE:	Registered Agent signatu	ire required w	dten reinstating)	DATE		۾ ل
	Signature, types or printed name or registered og							
12.	OFFICERS A	ND DIRECTORS	13.	<u>,, o roquiroo ii</u>	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 12	
12.	OFFICERS A					ICERS AND DIRECT		
	P	ND DIRECTORS	13.					34 (11/98
TITLE		ND DIRECTORS	13. 1.1 TITLE	T				≤ E034 (11/98
TITLE NAME STREET ADDRESS	P Sabatier, Louis E.	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	T			e Additio	R2E034
TITLE :	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES	T			e Additio	R2E034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORE: 1.4 CITY-ST-ZIP	T		☐ Chang	e Additio	R2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE	ss		☐ Chang	e Additio	R2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ss		☐ Chang	e	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES	ss		☐ Chang	e	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP	ss		☐ Chang	e	CR2E034 (
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE	SS		☐ Chang	e	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP	SS		☐ Change	e Addition	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE STE 100	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP 4.1 TITLE	SS		☐ Chang	e Addition	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE: 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE: 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE: 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	SS SS		☐ Change	e Addition	CR2E034
NAME STREET ADDRESS CITY-ST-ZIP TITLE	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY- ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY- ST- ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY- ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.3 STREET ADDRE 4.3 STREET ADDRE	SS SS		☐ Change	e Addition	CR2E034
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRES 4.3 STREET ADDRES 4.4 CITY-ST-ZIP 4.4 TITLE	SS SS		Change	e Addition	no n
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.3 STREET ADDRE 4.4 CITY-ST-ZIP 5.1 TITLE	SS SS	ADDITIONS/CHANGES TO OFF	☐ Change	e Addition	no n
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRES 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	SS	ADDITIONS/CHANGES TO OFF	☐ Change ☐ Change ☐ Change	e Addition	no n
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.3 STREET ADDRE 5.3 STREET ADDRE 5.3 STREET ADDRE	SS	ADDITIONS/CHANGES TO OFF	☐ Change ☐ Change ☐ Change	e Addition	no n
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRES 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	SS	ADDITIONS/CHANGES TO OFF	☐ Change ☐ Change ☐ Change	e Addition e Addition e Addition e Addition	36 . 36 . 36 . 36 . 36 . 36 . 36 . 36 .
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.3 STREET ADDRE 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.4 CITY-ST-ZIP	SS	ADDITIONS/CHANGES TO OFF	Change Change Change	e Addition e Addition e Addition e Addition	36 . 36 . 36 . 36 . 36 . 36 . 36 . 36 .
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SABATIER, LOUIS E. 13133 PROFESSIONAL DRIVE JACKSONVILLE FL	ND DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRE 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRE 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRE 5.4 CITY-ST-ZIP 6.1 TITLE	SS	ADDITIONS/CHANGES TO OFF	Change Change Change	e Addition e Addition e Addition e Addition	36 · 36 · 36 · 37 · 37 · 37 · 37 · 37 ·

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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: