PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90102 008 ***150.00

Daytime Phone #

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H32711

1. Corporation Name

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

BRITTANY BUILDERS, INC.

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Principal Place	e of Business	Mailing Address				i (Birdi) minn ritte (1611 fount ridet)fer ginte	474711	J(811 6)1	141 411 1	. 61611 1 66 1		
7227 CLINT MO	7227 CLINT MOORE ROAD	CLINT MOORE ROAD										
SALES CENTER SALES CENTER							DO NOT WRITE IN THE	s sp	ACE			
BOCA RATON FL 33496 US BOCA RATON FL 33496 US							3. Date Incorporated or Qualifed					
03							12/05/1984				-	
2. Principal Place of Business 2a. Mailing Add			dress				4. FEI Number	Applied For				
21		26				59-2502263	Not Applicable					
Suite, Apt.	#; etc.	Suite, Apt. #, etc.				-5Certifcate of Status Desired	\$8.75 Additional					
22		27				-5 Certificate of Status Desired		~Fee	.Requ	ired,		
City & State	e	City & State	⊢ , ′				6. Election Campaign Financing \$5.00 May Be					
23		28				Trust Fund Contribution Added to Fees						
Zip	Country Zip			Country			8. This corporation owes the current year le		jible] Yes	_]No	
24	25	1=*1	30				Personal Property Tax. 10. Name and Address of New Registered				1140	
	9. Name and Address of Current	Registered Agent		81	Name		10. Italie and Address of New Registered	4 A 91	,,,,,			
₽∩PI	KIN & SHURPIN, P.A.						<u></u>					
2499 GLADES RD STE 114				82 Street Addr			s (P.O. Box Number is Not Acceptable)				Ì	
	A RATON FL 33431			83								
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
				84	City		FI		85 Z	ip Co	de	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was at	Jinorizea	i by i	ine corpora	orpora ation's	ation submits this statement for the purpose on a board of directors. I hereby accept the appropriate the statement of the st	of cha ointm	inging ent as	its re regis	gistered tered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agent	t signature req	uired w	hen reinstating) DATE					
12.	OFFICERS AND	DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS A					
TITLE	VPD □ DELETE			1.1 TITLE] Chan	ge	☐ Addition (
NAME	REITSMA, RONALD A.		1.2 NA	1.2 NAME							1	
STREET ADDRESS	7229 CLINT MOORE ROAD		1.3 STREET ADDRESS							1		
CITY-ST-ZIP	BOCA RATON FL		_	1.4 CITY-ST-ZIP					7.0		- Addition	
TITLE	S	☐ DELETE	2.1 TITLE		1			L	_ Chan	је	Addition	
- <u>NAME</u>	- 10LE, - 201E/1			.2.2 NAME								
STREET ADDRESS	7227 CLINT MOORE RD.		2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	BOCA RATON FL		2. 4 CI		T-ZiP		, , , , , , , , , , , , , , , , , , , ,] Chan		Addition	
TITLE		☐ DELETE	3.1 TII					L	7 CHAIN	30	[_] Addition	
NAME			3.2 NA									
STREET ADDRESS			1		ADDRESS							
CITY-ST-ZIP		DELETE	3.4. C. 4.1 TI		T-ZIP] Chan		Addition	
TITLE		□ nere1e						L	onan	go		
NAME			4. 2 N									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP				I-ZIP			☐ Change ☐		Addition			
TITLE		- Dette ie	5.2 NA					_	-	•	_	
NAME STREET ADDRESS					ADDRESS							
STREET ADDRESS			5.4 CI								\$	
CITY-ST-ZIP TITLE			6.1 TIT			-] Chan	ge	Addition	
NAME			6.2 NA	AME								
STREET ADDRESS			6.3 ST	TREET	ADORESS						}	

6.4 CITY-ST-ZIP

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 frue 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 trastee 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 an an attachment with an address, with all other like empowered.