

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H40784

(1)

1. Corporation Name

C & J HOMEBUILDERS, INC.

Principal Place of Business

**95 LANG ROAD
FT. WALTON BEACH FL 32547-3162**

Mailing Address

**95 LANG ROAD
FT. WALTON BEACH FL 32547-3162**

**APPROVED
AND
FILED**

95 APR 17 PM 1:26

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/01/1985

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-2489019

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RICHBURG, PATRICIA L.
95 LANG ROAD
FT WALTON BEACH, 32547**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Patricia L. Richburg

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	RICHBURG, CHARLES B
STREET ADDRESS	95 LANG RD
CITY - ST - ZIP	FT. WALTON BEACH FL
TITLE	V
NAME	RICHBURG, PETER J
STREET ADDRESS	95 LANG ROAD
CITY - ST - ZIP	FT. WALTON BEACH FL
TITLE	SD
NAME	RICHBURG, PATRICIA L.
STREET ADDRESS	95 LANG ROAD
CITY - ST - ZIP	FT. WALTON BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	Richburg, Charles B.	
1.3 STREET ADDRESS	443 Sandy Ridge Circle	
1.4 CITY - ST - ZIP	Mary Esther, Florida 32569	
2.1 TITLE	Vice President	☒ Change ☐ Addition
2.2 NAME	Richburg, Peter J.	
2.3 STREET ADDRESS	457 Sandy Ridge Circle	
2.4 CITY - ST - ZIP	Mary Esther, Florida 32569	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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.

SIGNATURE:

Charles B. Richburg

Charles B. Richburg

3/24/95

(904)862-0172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number