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Apr 16, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H48940

1. Corporation Name
HALLMARK QUALITY HOMES, INC.

Principal Place of Business
9413 NORTH PALAFOX ST., SUITE 2
PENSACOLA FL 32534

Mailing Address
9413 NORTH PALAFOX ST., SUITE 2
PENSACOLA FL 32534

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1985

4. FEI Number

59-2488716

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 9413 North Palafox St., Suite 1

Suite, Apt. #, etc.

22 Pensacola, FL

City & State

23 32514

Zip

Country

24

25

2a. Mailing Address

26 9413 North Palafox St., Suite 1

Suite, Apt. #, etc.

27 Pensacola, FL

City & State

28 32514

Zip

29

Country

30

9. Name and Address of Current Registered Agent

KNODEL, L. FRED SR.
9413 NORTH PALAFOX ST., SUITE 2
PENSACOLA FL 32514

10. Name and Address of New Registered Agent

81 Name

Knodel, L. Fred Sr.

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

9413 North Palafox St., Suite 1

83

Pensacola, FL 32514

84 City

FL

85 Zip Code

32514

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 for 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 607.1505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PT
STREET ADDRESS KNODEL, L. FRED SR.
CITY-ST-ZIP 9604 BPB WJOTE TERRACE
PENSACOLA FL 32514

TITLE ☐ DELETE

NAME VS
STREET ADDRESS KNODEL, FREDDY, JR.
CITY-ST-ZIP 9512 HILLVIEW RD.
PENSACOLA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Knodel, L. Fred Sr.
1.3 STREET ADDRESS 1105 Signal Hill Lane
1.4 CITY-ST-ZIP Pensacola, FL 32514

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME VS
2.3 STREET ADDRESS Knodel, Freddy, Jr.
2.4 CITY-ST-ZIP 10419 Rawlings Drive
Pensacola, FL 32514

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/99

Date

Daytime Phone #