

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J07484** (5)

1. Corporation Name
BRENTWOOD BUILDERS, INC.

Principal Place of Business: **2362 PRESTON AVENUE SEBRING FL 33872**
Mailing Address: **2362 PRESTON AVENUE SEBRING FL 33872**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/03/1986**
3a. Date of Last Report: **10/05/1994**

2. Principal Place of Business: **21** 2b. Mailing Address: **26**

21. Suite, Apt. # etc.: **22** 26. Suite, Apt. # etc.: **27**

22. City & State: **23** 27. City & State: **28**

23. Country: **24** 28. Country: **29**

24. State: **25** 29. State: **30**

4. FEI Number: **59-2655849**
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**

6. This corporation has history for amalgamation with other Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**ABLES, CLIFFORD M III, ESQ
457 SOUTH COMMERCE AVENUE
SEBRING FL 33870**

10. Name and Address of New Registered Agent

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 607.04(3) 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 607.04(3), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

12.1 NAME: PD MARINE, TIM	12.2 STREET ADDRESS: 1927 BAMBI COURT SEBRING FL
12.3 NAME: _____	12.4 STREET ADDRESS: _____
12.5 NAME: _____	12.6 STREET ADDRESS: _____
12.7 NAME: _____	12.8 STREET ADDRESS: _____
12.9 NAME: _____	12.10 STREET ADDRESS: _____
12.11 NAME: _____	12.12 STREET ADDRESS: _____
12.13 NAME: _____	12.14 STREET ADDRESS: _____
12.15 NAME: _____	12.16 STREET ADDRESS: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME: PD MARINE, TIM	13.2 STREET ADDRESS: 2362 PRESTON AVE SEBRING FL 33872	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.3 NAME: _____	13.4 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 NAME: _____	13.6 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.7 NAME: _____	13.8 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 NAME: _____	13.10 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.11 NAME: _____	13.12 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 NAME: _____	13.14 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.15 NAME: _____	13.16 STREET ADDRESS: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. This hereby certifies that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.02(4)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation of this report or holder empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: **Tim Marine**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

42675 813-471-1917