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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J78494

(8)

Mailing Address

on an attackment with an address.

PINELAND HOMES, INC.

Principal Place of Business

SIGNATURE:

FILED Feb 03 1998 8:00am Secretary of State

75-9161

62D PO BOX 867 ENGLEWOOD FL 34295-7867					62D PO BOX 867 ENGLEWOOD FL 34295-7867					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
										06/18/1987		
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For		
21			26						65-0028131 X Not Applicable			
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.					5. Certificate of Status Desired			
City & State				City & State					6. Election Campaign Financing \$5.00 May Be			
23			28	28					Trust Fund Contribution			
Zip Country				Zip Country				·-	8. This corporation owes or has paid the current year Intangible			
24		25		29	29 30					Personal Property Tax due June 30. Yes No		
	g. Name	and	Address of Current	Regi:	stered Agent		_			10. Name and Address of New Registered Agent		
WE	AVER, ELE	BERT	C.				81	N	Name			
							82	s	Street Addr	ress (P.O. Box Number is Not Acceptable)		
1498 MANASOTA ROAD ENGLEWOOD FL 34223						-						
							83	ļ				
							84	-0	City	85 Zip Code		
D		1	-/ O 11 COT OFFI	7	005 JE00 FIELD 04-1	4 - 2 - 31		<u> </u>		FL FL FL FL FL FL FL FL		
office or re agent. I ar	o ine provis egistered aq m familiar w	ions (jent, d th, ar	of Sections 607.0502 or both, in the State of nd accept the obligati	and t f Flori ons d	607.1508, Florida Statu ida. Such change was of, Section 607.0505, F	autho lorida	ne above rized by Statutes	e-na / the s.	amed corp e corporati	oration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered		
SIGNATURE ,	Sincature tunes	or orie	ted name of recipiered acres	and title	e if applicable (NiO	TE Beg	istared Ane	ent si	ionatuta raquin	ed when reinstating) DATE		
12.	Digi casic, typec	ure, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
TITLE	PD		0.7.102.107.10		DELETE	_	1.1 TITLE		···T	Change Addition		
NAME	. •	R FI	BERT C.				1.2 NAME					
STREET ADDRESS		,	SOTA ROAD				1.3 STREET	חחני.	DEEGE			
	ENGLE					- 1			}			
CITY-ST-ZIP	VD VD	100	U FL		☐ DELETÉ	_	1.4 CITY - S 2.1 TITLE	<u> </u>	<u> </u>	Change Addition		
NAME		// NI	ED I			- 1	2.2 NAME		1			
1	BUSKIR					4			20500			
	TREET ADDRESS 1940 PENNSYLVANNIA AVE.			2.3 STREET ADDRESS 2.4 CITY - ST - ZIP			•					
CITY-ST-ZIP TITLE	ENGLE	100	U FL		DELETE		2. 4 CHY-8 3.1 TITLE	51 - ZI	1P	Change Addition		
NAME							3,2 NAME			- Orange - I récison		
I I								•••	araa			
STREET ADORESS							3.3 STREET		Į.			
CITY - ST - ZIP					☐ DELETE	*****	3,4, CITY - 5 4,1 TITLE	SI-ZI	(P)	Change Addition		
l f												
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STREET ADDRESS							4.3 STREET		J			
CITY - ST - ZIP					☐ DELETE		4.4 CMY-S	r-zir	P	Change Addition		
TITLE					☐ Octob		5.1 TITLE		ı	Change Till Wodings		
NAME							5,2 NAME					
STREET ADDRESS							5.3 STREET		Į.			
CITY - ST - ZIP							5.4 CITY-S	T-ZI	P	[] [] [] [] [] [] [] [] [] []		
TITLE					DELETE		6.1 TITLE			Change Addition		
NAME							6,2 NAME		İ			
STREET ADDRESS							S 3 STREET	ADDI	ress			
CITY-ST-ZIP			<u> </u>				6.4 CITY-S					
14. I hereby or	ertily that the	olni s ser is	mation supplied with	this f	tiling does not qualify f	tor the	exemple	tion et m	stated in S	Section 119.07(3)(i), Florida Statutes. I further certify that the information e shall have the same legal effect as if made under oath; that I am an		
officer or c	lirector of th	e cor	poration or the receiv	er or	trustee empowered to	execu	ute this i	repo	ort as requ	rired by Chapter 607, Florida Statutes; and that my name appears in		