

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90113 022 ***150.00

DOCUMENT # K00205

1. Corporation Name

LANDMARK HOME BUILDERS, INC.

Principal Place of Business

C/O CASTELLANO, WILLIAM Robert
1701 W HILLSBORO BLVD #401
DEERFIELD BEACH FL 33442
US

Mailing Address

1701 W HILLSBORO BLVD
SUITE 401
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business

21 3900 Bonaventure Blvd
Suite, Apt. #, etc.

22

City & State

23 Weston, FL
Zip Country

24 33332 25 USA

2a. Mailing Address

26 3900 Bonaventure Blvd
Suite, Apt. #, etc.

27

City & State

28 Weston, FL
Zip Country

29 33332 30 USA

9. Name and Address of Current Registered Agent

KELLEY, CHRISTOPHER P ESQ.
11090 DISCAYNE BLVD
SUITE 205
MIAMI FL 33138

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1987

4. FEI Number

65-0011631

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Legal Information Services, Inc

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

1290 Weston Road, Suite 300

83

Weston, FL

33329

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

Allen Kelley for Legal Info Svcs

DATE

4/16/99

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PSTD ☒ DELETE
NAME CASTELLANO, WILLIAM V.
STREET ADDRESS 1701 W HILLSBORO BLVD #401
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 PSTD ☐ Change ☒ Addition
1.2 NAME Robert S. Castellano
1.3 STREET ADDRESS 3900 Bonaventure Blvd
1.4 CITY-ST-ZIP Weston, FL 33332

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

Date

Daytime Phone #

4-16-99 (954-214-4733)

0347539

CDEN24 141081