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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 11 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K05999

(3)

PINELLAS HOMES, INC.

SIGNATURE:

Principal Place of Business Mailing Address				I PORTUGIA ANTO ANTO ANTO ANTO ANTO ANTO ANTO ANT	† 1841 OLDIY O'INI BION BION BION <u>Oldi</u>
3452 STATE ROAD 584 PALM HARBOR FL 34684		3209 STATE ROAD 584 Palm Harbor FL 34884 US	-3424		
				 Date Incorporated or Qualified 12/09/1987 	\$a. Date of Last Report 05/01/1996
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2860383	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	Ó	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24)	25	29	30	6. This corporation has liability for li Florida Statutes	intangible tax under s. 199.032, Yes No
241	9. Name and Address of Curi		130]	10. Name and Address of New Re	
DEU	FEL, JOHN H.		81 Name		5
3452 STATE ROAD 584 PALM HARBOR FL 34884			82 Street	Address (P.O. Box Number is Not Acceptab	le)
			3.156	Address (1.0. box Number is Not Acceptab	
			83	5142 115 1	Q AI
			84 City	A Year I	85 Zip Code
				- owe	FL
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob-	ate of Florida. Such change was	authorized by the co	d corporation submits this statement for the proporation's board of directors. I hereby acceptions	urpose of changing its registered of the appointment as registered
SIGNATURE					
12.	Signature, typod or printed name of registered	agent and title if applicable (NO AND DIRECTORS	OTE: Registered Agent signatu	re required when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DEDS AND DIDECTORS IN 12
TITLE	PD	DELETE	1.1 YITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	DUEFEL, JOHN H SR.		1.2 NAME	BANN M DEUF	
STREET ADDRESS	3209 STATE ROAD 584		1.3 STREET ADDRESS	SEIVE LE 10	A)
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-ST-ZIP		「一」 エソレジソ
TITLE		DELETE	2.1 TITLE	THE TANK THAT	Change Addition
NAME			2.2 NAME	· ·	•
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	1	. ☐ DELETE	4.1 TETLE		Change L Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-7IP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		L.J DECETE	5.1 TITLE		fini cualific fini wood(ini)
NAME .			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	,	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SI-ZIP			6.4 CITY - ST - ZIP		,
14. I do hereb	by certify that the information supp	olied with this filing does not qua	alify for the exemption	stated in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatio	on indicated on this annual report of the corporation	or supplemental annual report is not the receiver or trustee emoc	s true and accurate an	d that my signature shall have the same lega report as required by Chapter 607, Florida S	al effect as if made under oath; that
appears in	ri Block 12 or Block 13 if charged	, or or crue, schment with an a	ddress.	The same and an experience of the same and t	10000