Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

DOCUMENT # L10504

1. Corporation Name

PARADISE BUILDERS OF S.W. FLORIDA, INC.

Suite, Apt. #, etc.

21

Principal Place of Business

Mailing Address

1423 SE 16TH PLACE SUITE 101

2a. Mailing Address

Suite, Apt. #, etc.

26

27

CAPE CORAL FL 33990

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90183 005 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

08/22/1989 4. FEI Number

65-0143983

City & State 23		28 City	City & State			6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fer			
Zip	Country	Zip		Country		8. This corporation owes the	current year In		
24	25	29	ſ	30		Personal Property Tax.	•	X Yes	□No
	9. Name and Address of Cur	rent Registered	Agent			10. Name and Address of Ne	w Registered	Agent	
				81	Name				
LONG, WILLIAM 1423 SE 16TH PLACE SUITE 101				82	Street Ad	Address (P.O. Box Number is Not Acceptable)			
				02	83				
				83					
CA	PE CORAL FL 33990			0.4	City		_	85 Zip (
				84	City		FL	. 85 Zip (-oue
office or	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Su ligations of, Secti	ch change was au on 607.0505, Flor	ithorized by ida Statutes	the corpora	rporation submits this statement for tion's board of directors. I hereby ac	the purpose of cept the appoi	changing its intment as req	registered gistered
12.		AND DIRECTOR		13.		ADDITIONS/CHANGES TO	OFFICERS AN	ND DIRECTO	RS IN 12
TITLE	P		☐ DELETE	1.1 TITLE		D/P/S/T		Change T	Addition Addition
NAME	LONG, WILLIAM			1.2 NAME		•	•		
STREET ADDRES	s 1423 SE 16TH PLACE SUITI	E 101		1.3 STREET	ADDRESS			•	
CITY-ST-ZIP	CAPE CORAL FL 33990			1.4 CITY-ST	r-ZIP				
TITLE			☐ DELETE	2.1 TITLE		V		Change	Addition
NAME				2.2 NAME		Keller, John A.			
STREET ADDRES	s .	. , .		2.3 STREET	ADDRESS	1423 SE 16th Place	Suite	101	
CITY-ST-ZIP	}			2.4 CITY-S)	Cape Coral, FL 33			
TITLE	<u> </u>		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	<u> </u>			3.2 NAME	l				
STREET ADDRES	s			3.3 STREET	ADDRESS				
CITY-ST-ZIP				3.4. CITY-S	1-ZIP				
TITLE			☐ DELETE	4.1 TITLE			··	Change	Additio
NAME				4. 2 NAME					
STREET ADDRES	s			4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST	r-ZIP				
TITLE			☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME				5.2 NAME					
STREET ADDRES	s			5.3 STREET	ADDRESS				
CITY-ST-ZIP	1			5.4 CITY-ST	r-ZIP				
TITLE 1-11)		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME		•		6.2 NAME	ļ				
132	i sii tarahiyan			63 STREET	ADDRESS				

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 or arrattachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PED OR PRINTED