

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 04 1997 8:00am
Secretary of State

DOCUMENT # L25099 (7)

1. Corporation Name
LIFESTYLE HOMES OF NORTH FLORIDA, INC.



Principal Place of Business
3626 RICHMOND ST.
P.O. BOX 60, ORTEGA STATION
JACKSONVILLE FL 32205

Mailing Address
3626 RICHMOND ST.
P.O. BOX 60, ORTEGA STATION
JACKSONVILLE FL 32205-9424

3. Date Incorporated or Qualified 10/25/1989
3a. Date of Last Report 02/05/1996

4. FEI Number 59-2976694
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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOWELL, WILLIAM R., II
3626 RICHMOND ST.
JACKSONVILLE FL 32205

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 607.0502 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP
HOWELL, WILLIAM R., II
3626 RICHMOND ST.
JACKSONVILLE FL

☐ DELETE

1.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

TS
HOWELL, LAURA S.
3626 RICHMOND ST.
JACKSONVILLE FL

☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

☐ DELETE

5.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

6.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904-202-0778
MAY 31 1997

CR2E034 (9/96)