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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L52771** (7)

1. Corporation Name

OLYMPIA HOMES, INC.

FILED
95 JUL 14 AM 11:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

**C/O PHILIP TATCH
601 S LAKE DESTINY RD #200
MAITLAND FL 32751**

Mailing Address

**C/O PHILIP TATCH
601 S LAKE DESTINY RD #200
MAITLAND FL 32751**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/19/1990	3a. Date of Last Report 04/12/1994
4. FEI Number 59-3001215	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. 199.022, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**TATCH, PHILIP
601 S LAKE DESTINY RD #200
MAITLAND FL 32751**

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 fee # applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
KANTOR, JOSEPH
222 S WESTMONTE DR #210
ALTAMONTE SPRINGS FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VSD
MERDINGER, STEVEN
222 S WESTMONTE DR #210
ALTAMONTE SPRINGS FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH KANTOR

7/10/95

**407-
C82-6940**