FILED Feb 27, 1999 8:00 am

Secretary of State

02-27-1999 90096 020 ***150.00

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 # L57837

1. Corporation Name

DESIGNER HOMES OF SARASOTA, INC.

						-			
Principal Place of Business Mailing Address						64 15 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
% WILLIAM R. (GARDEN	% WILLIAM R. GARDEN			,	' ' '		•	
1501 LAUREL ST STE 103 SARASOTA FL 34236		1501 LAUREL ST STE 103 SARASOTA FL 34236				DO NOT WRITE IN THIS SPACE			
0.111.001.112	0.000	*				3. Date Incorporated or Qualifed			
						03/16/1990			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For	
1880	880 University Parkwa y 1880 Unive			rsity Pkwy.		65-0177136	No	t Applicable	
Suite, Apt.	·	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75	Additional	
22		27				5. Certificate of Status Desired	Fee Re	quired	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
23 Saras	sota, FL	28 Sarasota,	F'L			Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Zip	_ Country	1		8. This corporation owes the current year In		_	
34243	3-2225 ₂₅ USA	29 34243-2225 30	USZ	Α		Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Current I	Registered Agent		г		10. Name and Address of New Registered	Agent		
GAR		81	81 Nawiliam R. Garden						
GARDEN, WILLIAM R. 1501 LAUREL ST STE 103			82 Street Address			ss (P.O. Box Number is Not Acceptable) University Parkway			
SARASOTA FL 34236-3722			83	100	50	University Farkway			
07410)		"						
ı I			84	City	<u> </u>	ota, FL FL	85 Z P	Gode 43-222	
	() () () () () () () () () ()		سيار	لهوسوما	las	retion submits this statement for the purpose of	t changing its		
11. Pursuant	to the provisions of Sections 607-0502 a hoistered agent, or both in the State of	Florida Such change was auth	orized by	the corpo	corpor	ration submits this statement for the purpose o's board of directors. I hereby accept the appo	intment as re	gistered	
agent. I ar	familiar with and accept the obligation							ŀ	
SIGNATURE	Marin J	//	Will:	iam_F	R.,	Garden, President 1/	<u> 28/99 </u>		
12.	Signature, typed or printed name of registered agents OFFICERS AND		13.	nt signature re	equirea v	ADDITIONS/CHANGES TO OFFICERS A		DRS IN 12	
TTLE	PST OFFICERS AND	□ DELETE	1.1 TITLE		DC		Change	Addition	
NAME	111		1.2 NAME	F.		=	T		
	1501 LAUREL ST STE 103		GP			RDEN, WILLIAM R.			
STREET ADDRESS	SARASOTA FL				18	80 University Parkwa	<u>Y</u>		
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 TITLE		Sa	rasota, FL-34243-222	5 Change	Addition	
	GARDEN, WILLIAM R		22 NAME D				A. ·		
NAME				2.3 STREET ADDRESS G.		RDEN, WILLIAM R.			
STREET ADDRESS	SARASOTA FL		2.4 CITY-5		18	80 University Parkwa	У		
CITY-ST-ZIP	SANASOTA FL	☐ DELETE	2.4 CITY-8	91-ZIP	Sa	rasota, FL 34243-222	5 Change	Addition	
TITLE NAME		- December	3.2 NAME					_	
STREET ADDRESS			3.3 STREE	TADDRESS					
CITY-ST-ZIP			3.4. CITY-S						
TITLE		☐ DELETE 4.1T					Change	☐ Addition	
NAME			4. 2 NAME						
STREET ADDRESS				TADDRESS					
CITY-ST-ZIP			4.4 CITY-S					į	
TITLE		☐ DELETE	5.1 TITLE		-		☐ Change	Addition	
NAME			5.2 NAME					ļ	
STREET ADDRESS			5.3 STREE	TADDRESS					

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 allowed report or supplemental annual report is true and accurate and that m) 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

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

□ DELETE

William R. Garden 1/28/99 941 358-9809

☐ Addition