

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L89732** (6)

1. Corporation Name

CHATEAU BUILDERS, INC.



Principal Place of Business

Mailing Address

236 HWY. 98E
DESTIN FL 32541
US

PO BOX 396
DESTIN FL 32540
US

3. Date Incorporated or Qualified

07/24/1990

3a. Date of Last Report

04/04/1995

2. Principal Place of Business

2a. Mailing Address

21 **151 REGIONSWAY BLDG 1**

26 **SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **SUITE F**

27

23 **DESTIN, FL**

28 City & State

24 **32541** 25 **USA**

29 Zip

30 Country

4. FEI Number

59-3022323

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, WILLIAM S
909 MAR WALT DRIVE
SUITE 104
FT WALTON BEACH FL 32547

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 block if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PS			<input type="checkbox"/>
	CRAWFORD, T. C	233 YACHT CLUB DR	FT WALTON BEACH FL	
	D			<input type="checkbox"/>
	CRAWFORD, T. C	233 YACHT CLUB DR	FT WALTON BEACH FL	
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
	VICE PRESIDENT			<input type="checkbox"/>	<input checked="" type="checkbox"/>
	MORTON F. MOORE	197 EDGE AVE.	VALPARAISO, FL. 32580		
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

T.C. CRAWFORD 1/16/96 904-654-3139

CR2E034 (12/95)