## 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** 

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90085 018 \*\*\*158.75

|--|--|--|--|

DOCUMEN	1	#	19	7	'329
<ol> <li>Corporation Name</li> </ol>				•	<b></b> -

MONK CUSTOM HOMES, INC.

Principal Place of Business 2381 21 ST ST. SW NAPLES FL 33964

Mailing Address 2381 21ST ST SW NAPLES FL 33964

US

DO NOT WRITE IN THIS SPAC	DO	NOT	WRITE	١N	THIS	SPAC
---------------------------	----	-----	-------	----	------	------

3. Date Incorporated or Qualifed

									08/09/19	990				
2. Principal P	lace of Business	<del></del>	2a. Mai	ling Address			<u> </u>	4.	FEI Numb	er			Ap	plied For
21			26						65-0207	809			No	t Applicable
Suite, Apt.	#, etc.		Suit	e, Apt. #, etc.				5.	Certifcate	of Status De	sired	$\forall$	\$8.75	
22			27									<u> </u>	Fee Re	<u> </u>
City & State	е		City	/ & State				6.	Election C			П	\$5.00	
23			28					_	Trust Fund	Contributio	n		Added t	o Fees
Zip		Country	Zip	(	— Сош	ntry		8.	. This corpo			ent year l	_	□Na
24	25		29		30					roperty Tax			Yes	□No
	9. Name and	Address of Curren	t Registered	d Agent		81	Nema		. Name and			egistere	u Agent	
MON	IK, LINDA S					ا"			K, U					
	IN, LINDA 3 I 21ST ST SW				į	82	Street Ad	Address (	P.O. Box Nu	mber is Not	Accepta	ble)	1)	
	LES FL 34117					-		1820	TAY	IMMI	112	47 <u>~</u>	<u>~</u>	
INAFI	LEO PL 04117					83								
						84	City	* * * *	ميده				85 Zip (	Code
								DA	OVES			<u> </u>	L   154	$-10\nu$
11. Pursuant	to the provisions	of Sections 607.050 of both, in the State and accept the obliga	2 and 607.1	508, Florida Statute	es, the ab	ove	-named co	corporation	n submits the	is statemen ctors. I herel	t for the p by accent	purpose of the app	ot changing its ointment as re	registered gistered
omce or r agent. I a	egistered agent, m familler with	and accept the obliga	tions of Sec	tion 607.0505, Flo	rida Statu	ites.	ine corpore		or anor		-,	dia	2/00	~
SIGNATURE	Time.	as 1.	[nm		P	UE:	SIDE	UT	LIND	4 S. H	OUK	413	1 199	
3IGNATORE	Storature, typed or pr	inted name of registered age			Registered	Agent	signature req	neriw beniupe	reinstating)			DATE	· · · · · · · · · · · · · · · · · · ·	NO 111 40
12.		OFFICERS AN	D DIRECTO		13.				ADDITIONS	S/CHANGES	TO OFF	-ICERS /	AND DIRECTO	Addition
TITLE	PVST			☐ DELETE	1.1 ΠΪ	LΕ		ı					Change	(_) Addition
NAME	MONK, LIND	AS.			1.2 NA	ME								
STREET ADDRESS	2381 21ST S	ST SW			1.3 ST	REET.	ADDRESS							
CITY-ST-ZIP	NAPLES FL				1.4 CI	TY-ST	- ZIP							
TITLE	D			DELETE	2.1 TII	RΕ							Change	☐ Addition
NAME	MONK, LIND	AS			2.2 NA	ME	-							
STREET ADDRESS	2381 21ST S	ST SW			2.3 ST	REET	ADDRESS							
CITY-ST-ZIP	NAPLES FL				2.4 C	TY-S1	T-ZiP							
TITLE				☐ DELETE	3.1 Ti	rle	- — Ţ						Change	Addition
NAME					3 2 NA	ME	1							
STREET ADDRESS					3.3 ST	REET	ADDRESS							
CITY-ST-ZIP					3.4. CI	ITY-SI	T-ZIP			_				
TITLE		<del></del>		☐ DELETE	4.1 TIT	_							☐ Change	☐ Addition
NAME					. 4. 2 N	AME	ļ							
STREET ADDRESS							ADDRESS							
	J				4.4 CF									
CITY-ST-ZIP TITLE	<del> </del> -	<del></del>		DELETE	5.1 TI								☐ Change	Addition
NAME	Į.				5.2 NA									
					5 3 ST	REET	ADDRESS							
STREET ADDRESS	7				5.4 CI		1	}						
CITY-ST-ZIP	<del> </del>			DELETE	6.1 TI		+	<del> </del>					Change	Addition
TITLE					6.2 N/								,	
NAME ,	-				1		. ADDOCCC							
STREET ADDRESS							ADDRESS	(						
CITY-ST-ZIP					6.4 CI	1Y-\$1	I-ZIP	Ļ <u> </u>	-+ 110 07/2)			<del></del>		

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, by or an effectment with an address, with all other like empowered.

SIGNATURE: